IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

(C1)

PERMIT# 105437 PIN# 4778-27-4241.3

OWNER OR CONTRACTOR FLEETWOOD HOMES PHONE: Business 704-872-0179 Home 704-546-7036 DATE 4-10-02

ADDRESS 1270 NORTHSIDE DR STATESVILLE, NC 28625

LOCATION US 21N, TR CHIEF THOMAS ROAD, TR 1ST DRIVE ON RIGHT PAST HARMONY BLEND, BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 7.0 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 794 Date 3-19-02
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400
No. Lines AVE Trench Width 36" Max. Trench Bottom Depth 28"

☑ New System ☐ Repair System Type I II III IV V VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, PUMP
Maintenance Agreement Required: ☐ Yes ☐ No
Gravel Depth 12" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

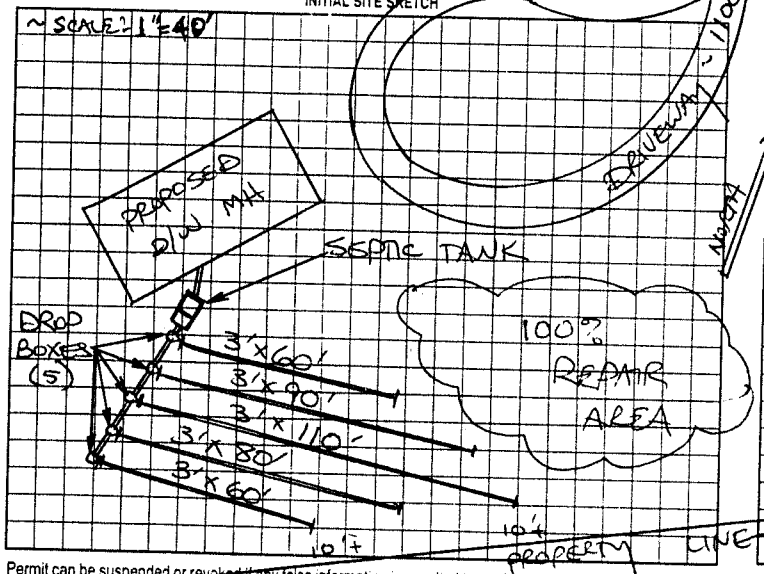
Water Supply: ☐ Individual ☑ Public ☐ Community

100 feet

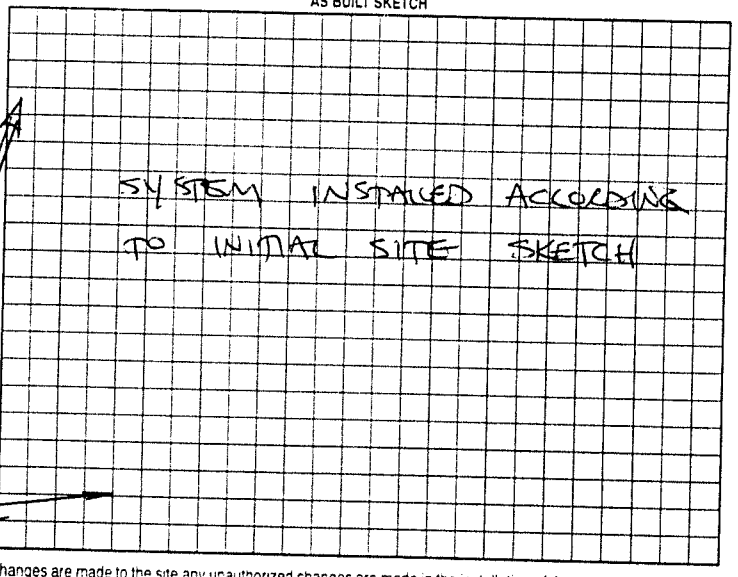
Comments/Conditions: KEEP DRAINLINES 28" DEEP OR LESS

Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit, any unauthorized changes are made to the site any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Renee Hall date 4-11-02 Installed by: CRAIG THOMPSON

Improvement Permit by: STEVE HEDRICK date 4-10-02 Operation Permit by: STEVE HEDRICK date 4-23-02

Authorization to Construct by: STEVE HEDRICK date 4-10-02 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK