IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 122136 PIN# 4787-53-4454 DATE 6-28-04

OWNER OR CONTRACTOR DELFINO ASCENCIO PHONE: Business Home 704-883-0615

ADDRESS 190 LOGGERHEAD ROAD STATESVILLE, NC 28625

LOCATION US 64 EAST, TL COOL SPRINGS ROAD, TR LOGGERHEAD ROAD, TR HORIZON DR, 1ST LOT ON RIGHT

SUBDIVISION SUNSET VILLAGE BLOCK / SECTION LOT 3 LOT AREA 0.59 SITE CLASS PS DESIGN FLOW 240/360 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet

No Lines THREE Trench Width Max Trench Bottom Depth Gravel Depth 12"

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: CONVENTIONAL GRAVITY

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 2

☒ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

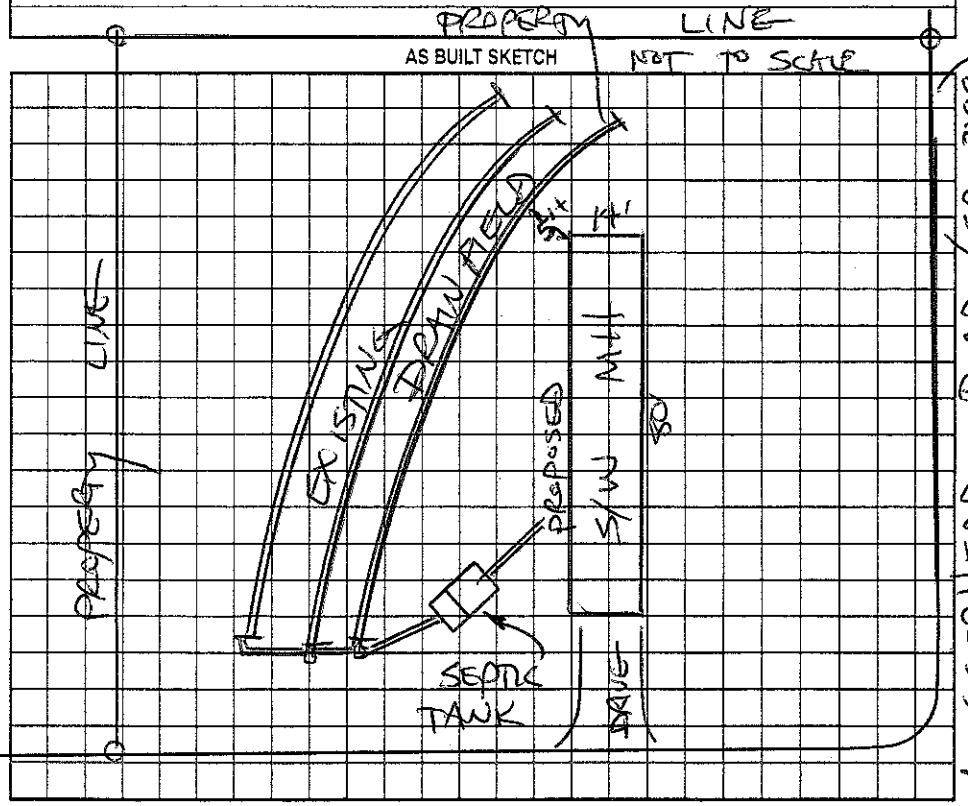
Water Supply:
☐ Individual
☒ Public
☒ Community

Comments:/Conditions:

INITIAL SITE SKETCH

Comments:/Conditions: KEEP MH MINIMUM 5' FROM SYSTEM

AS BUILT SKETCH NOT TO SCALE



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: date Installed by:

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: STEVE HEDRICK date 6-28-04

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