IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 091843 PIN# 4810 65 7191 DATE 10-16-00

OWNER OR CONTRACTOR TIM COLVIN PHONE: Business _____ Home 876-2993

ADDRESS 182 NEWLAND LANE STATESVILLE, NC 28625

LOCATION NC 115 N, TL MTN. VIEW RD, TL NEWLAND LANE, NEAR END ON RIGHT AT #182

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.29 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. C

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 2 Trench Width 36" Max Trench Bottom Depth _____ Gravel Depth 12"

☐ New System ☐ Repair System Type: ☑ I ☐ II ☐ IV ☐ V ☐ VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

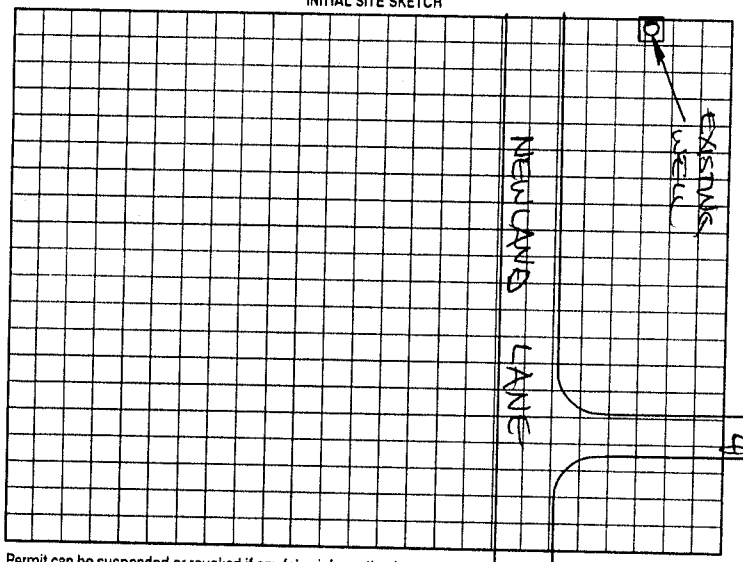
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

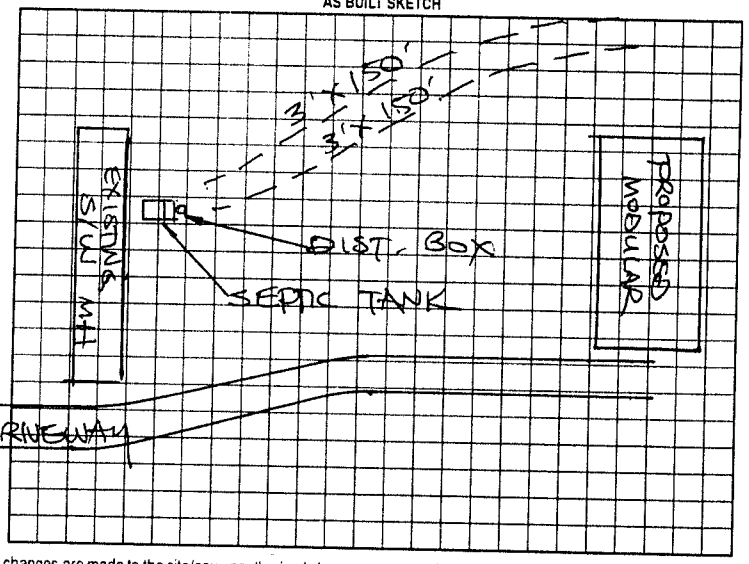
Comments:/Conditions:

Comments:/Conditions EXISTING S/W MH TO BE REMOVED UPON OCCUPANCY OF MOD. HOME

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: _____ date _____ Installed by: _____

Improvement Permit by: _____ date _____ Operation Permit by: _____ date _____

Authorization to Construct by: _____ date _____ Existing System Inspection by: STEVE HENDRICK date 10-16-00

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