IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093256 PIN# 4860 74 2322 (PT) DATE 12-13-00

OWNER OR CONTRACTOR LUIS A. GAMEZ PHONE: Business _____ Home 546-7081

ADDRESS 166 CAMPGROUND ROAD STATESVILLE NC 28625

LOCATION US 21 N TL TABOR RD, TR FORNEY DRIVE, LOT # 22 ON RIGHT (MIDWAY)

SUBDIVISION FORNEY ACRES BLOCK / SECTION _____ LOT 22 LOT AREA 0.52 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 10-1-00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: 25% REDUCTION PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

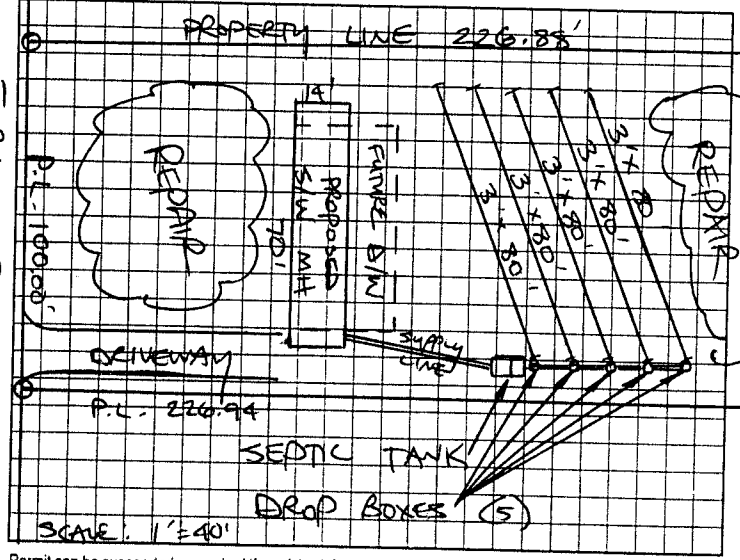
☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

Water Supply: ☐ Individual ☑ Public ☐ Community

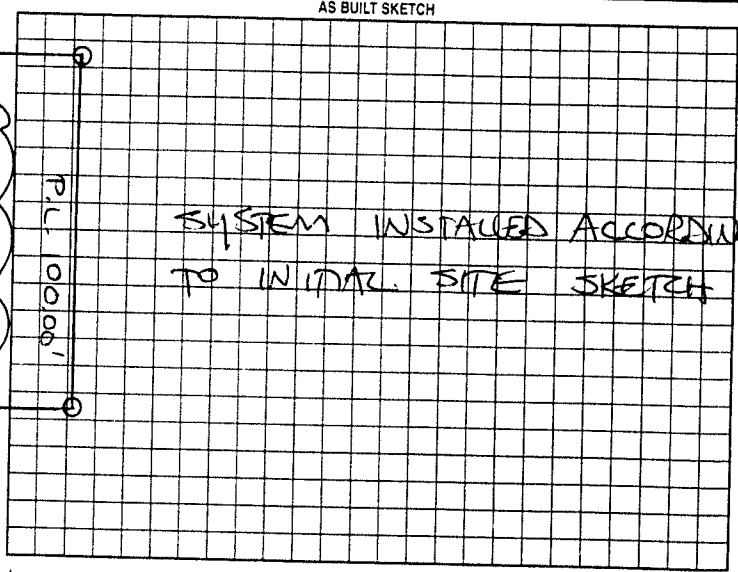
Comments/Conditions: CONTACT HEALTH DEPT. TO FLAG-OUT SYSTEM AFTER CLEARING & BEFORE INSTALLATION.

Comments/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH



FORNEY ROAD

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: X Luis A. Gamez date 12-13-00 Installed by: STATESVILLE BACKHOE

Improvement Permit by: STEVE HENDRICK date 12-13-00 Operation Permit by: STEVE HENDRICK date 3-23-01

Authorization to Construct by: STEVE HENDRICK date 12-13-00 Existing System Inspection by: _____ date _____

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