IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 095164 PIN# 4862 39 8688 DATE 4/2/01

OWNER OR CONTRACTOR TERRY BELCHER PHONE: Business _____ Home (704) 876-0688

ADDRESS 1530 TURNERSBURG HWY, STATESVILLE, NC 28625

LOCATION I-77N, TR NC 901, TL CRATER ROAD, TR CARTWRIGHT RD, TL CHESHIRE RIDGE RD, 3RD LOT ON RIGHT

SUBDIVISION CHESHIRE RIDGE BLOCK / SECTION II LOT 41 LOT AREA 1.42 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 2-22-01
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth (30") Gravel Depth 12"

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

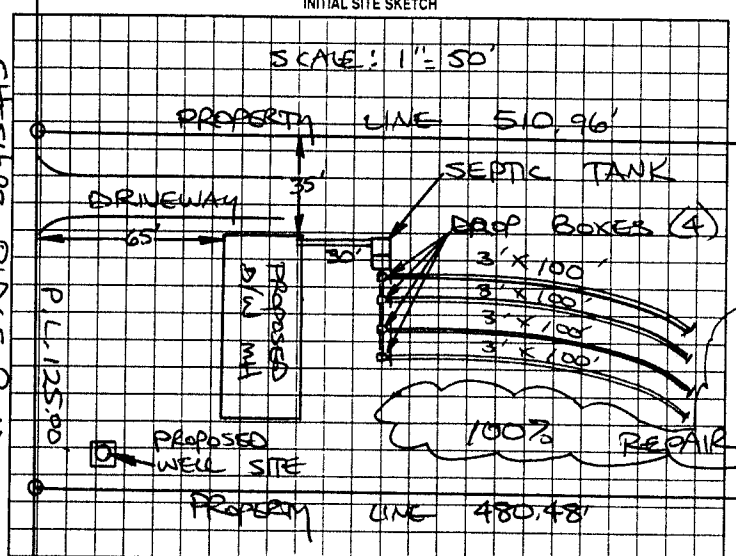
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

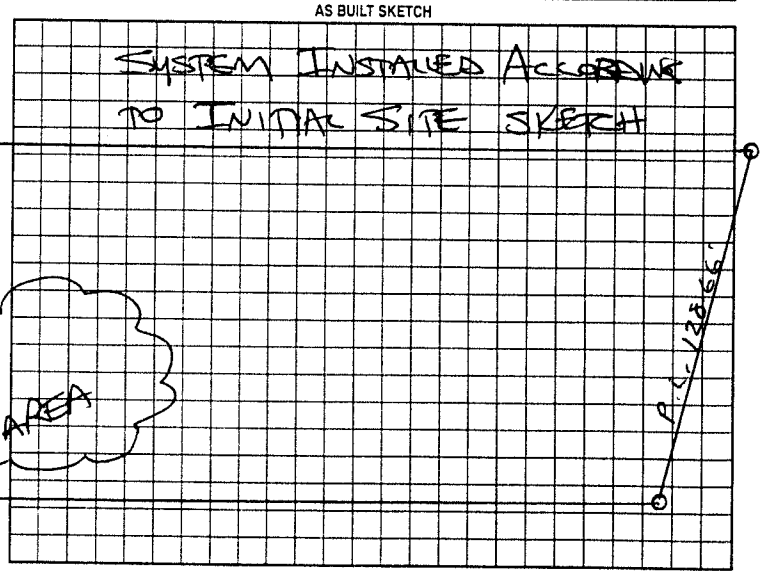
Comments/Conditions: ① KEEP SYSTEM MINIMUM 100 FEET FROM WELL ② INSTALL LINES ON CONTOUR, NO DEEPER THAN 30"

Comments/Conditions: SEPTIC TANK W/ MARKER INSTALLED USING "POLYLOK" 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: Terry E. Belcher date Mon. 4/2/01 Installed by: TOMMY FRYE

Improvement Permit by: STEVE HEDRICK date 4-2-01 Operation Permit by: STEVE HEDRICK date 5-2-01

Authorization to Construct by: STEVE HEDRICK date 4-2-01 Existing System Inspection by: _____ date _____

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