IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 127151 PIN# 4862-73-4261 DATE 3-11-05

OWNER OR CONTRACTOR OAKWOOD MOBILE HOMES INC - WILKESBORO PHONE: Business (336) 973-3018 Home

ADDRESS 3705 WEST US HIGHWAY 421 WILKESBORO NC 28697

LOCATION I-77 N TR HWY 901 TL ALLEN RD CORNER OF ALLEN & HOUSTONVILLE RDS ON RIGHT (350 ALLEN)

SUBDIVISION BLOCK / SECTION LOT LOT AREA 6.001 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 gpd/ft² (EX.)

Septic Tank: 1000 EX Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480 EX

No Lines 6 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: PUMP CONVENTIONAL

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

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

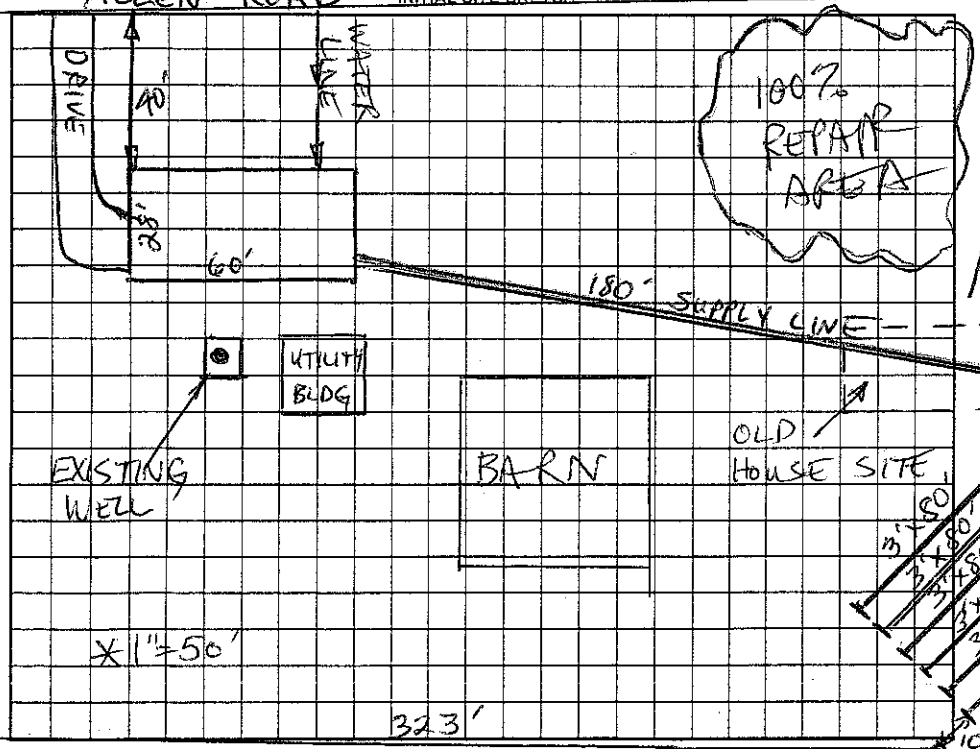
Water Supply: ☑ Individual ☑ Public ☐ Community

Comments:/Conditions:

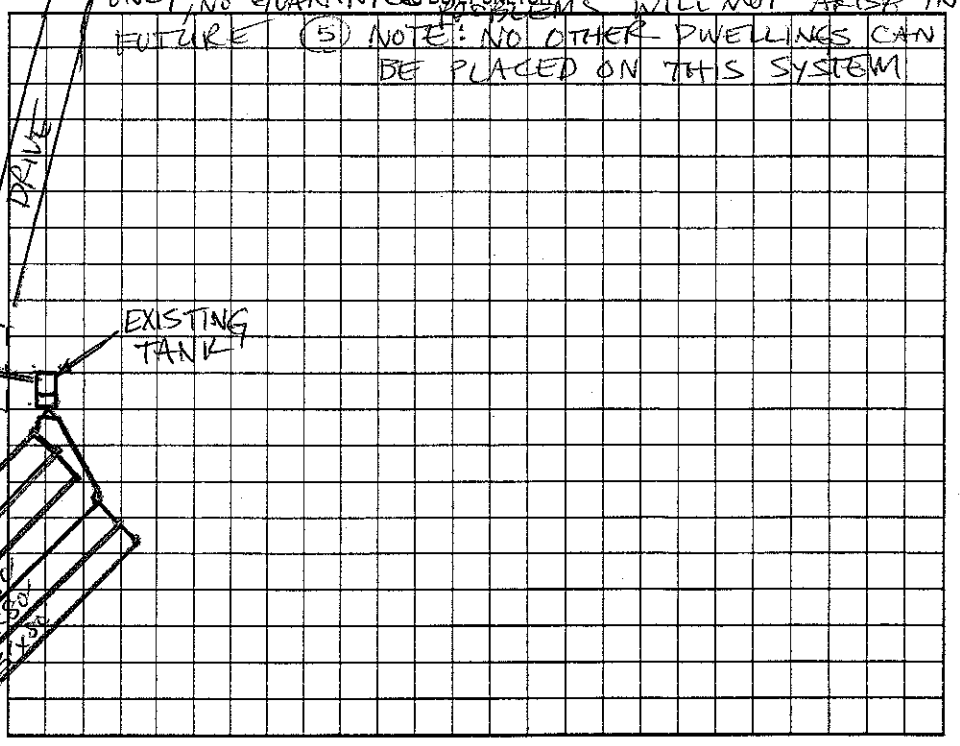
Comments:/Conditions: ① SYSTEM FUNCTIONING PROPERLY AT TIME OF INSPECTION ② PERMISSION TO CONNECT NEW STRUCTURE TO EXISTING SYSTEM ③ STRUCTURE SHALL NOT INCREASE NUMBER OF BEDROOMS ON SYSTEM ④ VISUAL INSPECTION ONLY, NO GUARANTEE PROBLEMS WILL NOT ARISE IN FUTURE ⑤ NOTE: NO OTHER DWELLINGS CAN BE PLACED ON THIS SYSTEM

ALLEN ROAD

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 3/16/05

Improvement Permit by: Christa M. Sherrill PS, LSS date 3-11-05

Authorization to Construct by: Christa M Sherrill PS, LSS date 3-11-05

Installed by:

Operation Permit by: date

Existing System Inspection by: Christa M. Sherrill PS, LSS date 5-5-05

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