Shirley Jennings

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 127584 PIN# 4863-32-3448 DATE 6-2-05

OWNER OR CONTRACTOR CLAYTON HOMES- STATESVILLE PHONE: Business (704) 873-2547 Home

ADDRESS 2026 NORTHSIDE DRIVE STATESVILLE NC 28677

LOCATION I-77 N (R) NC 901 (L) EAGLE MILLS (R) TRIVETTE ON LEFT @ 299 TRIVETTE RD.

SUBDIVISION BLOCK / SECTION LOT LOT AREA 0.93 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.33 GPD/FT² (EXIST)

Septic Tank: EXISTING Gallons: STB Date
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1090 Linear Feet 360
No Lines THREE (3) 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: MAX. FEASIBLE
Maintenance Agreement Required: ☐ Yes ☑ No

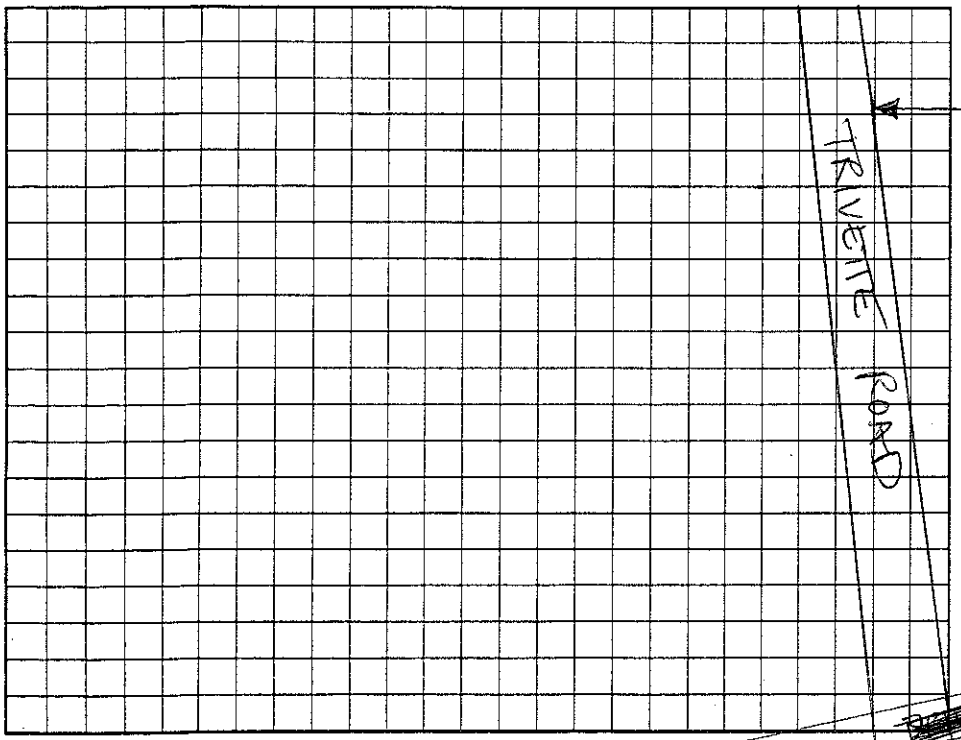
☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms No. Employees
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

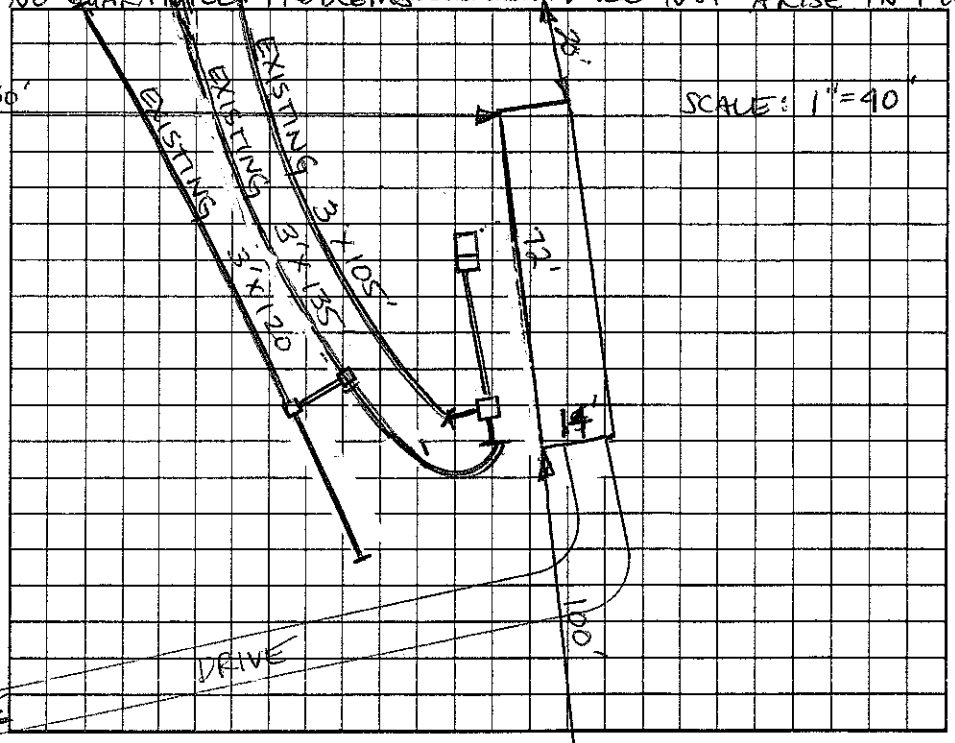
Comments:/Conditions:

Comments:/Conditions: (1) SYSTEM FUNCTIONING PROPERLY, PERMISSION TO CONNECT NEW STRUCTURE TO EXISTING SYSTEM (2) NEW STRUCTURE SHALL NOT INCREASE NUMBER OF BEDROOMS ON SYSTEM (3) THIS IS A VISUAL INSPECTION ONLY. THERE IS NO GUARANTEE PROBLEMS WILL NOT ARISE IN FUTURE

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 6/10/05 Installed by: A-1 BACKHOE

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: Christy M. Sewell, RS CSS date 6-2-05

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