IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 079224 PIN# 4863 51 9376 DATE 2-12-99

OWNER OR CONTRACTOR JAMES NELSON PHONE: Business Home

ADDRESS 118 DOE TRAIL STATESVILLE NC 28625

LOCATION I-77 N, TR NC 901, TL EAGLE MILLS RD, TL NATURE'S WAY, ON LEFT AT SCENIC POINT

SUBDIVISION CHESHIRE RIDGE BLOCK / SECTION III LOT 8 LOT AREA 1.29 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GAD/FT2

Septic Tank: 1000 Gallons; STB 620 Date 1-8-99

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 36"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required ☐ Yes ☑ No

Gravel Depth 12" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

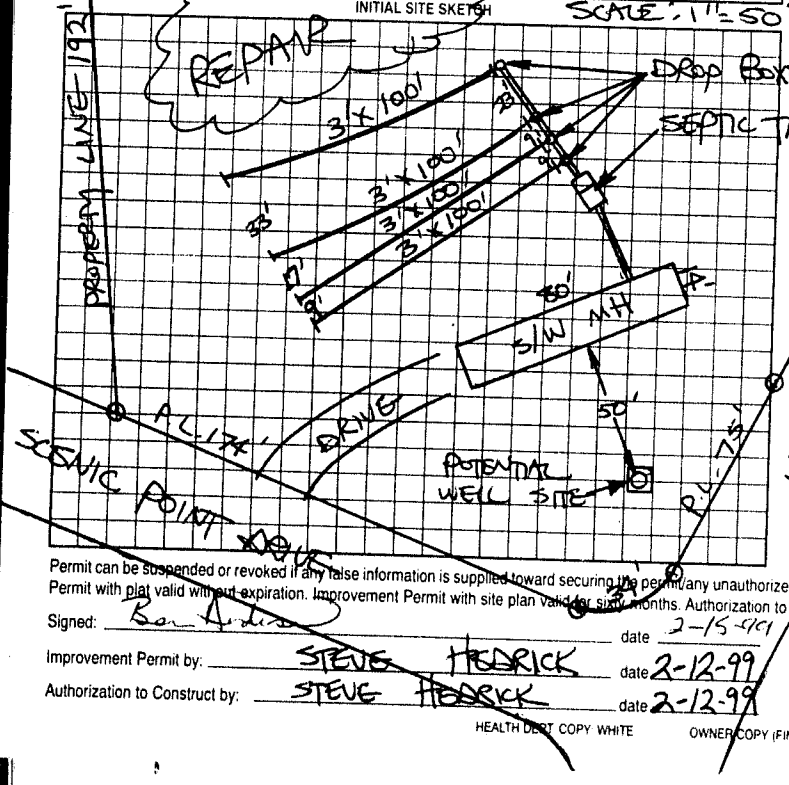
☐ Other

Water Supply: ☐ Individual ☐ Public ☐ Community WELL

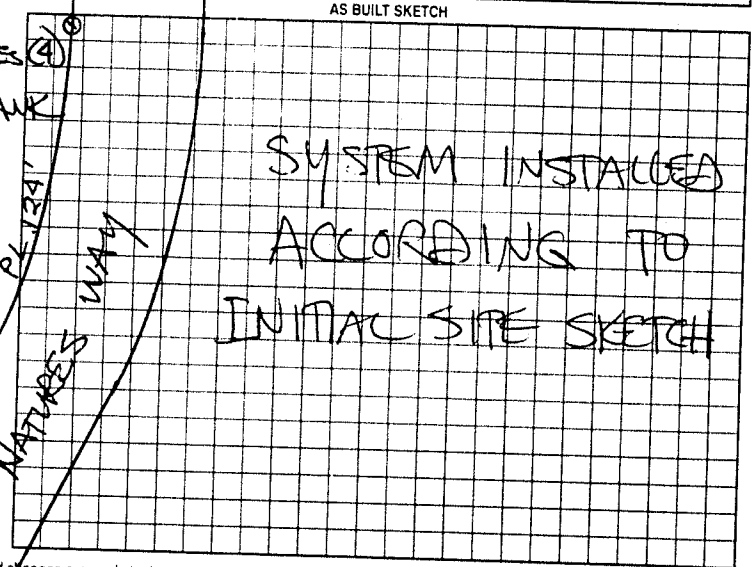
Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

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

INITIAL SITE SKETCH SCALE: 1" = 50'



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: Bo A. Lins date 2-15-99

Improvement Permit by: STEVE HEDRICK date 2-12-99

Authorization to Construct by: STEVE HEDRICK date 2-12-99

Installed by: SAMMY KEAVLS

Operation Permit by: STEVE HEDRICK date 3-2-99

Existing System Inspection by: date

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