IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☑ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # 14890 PIN # ~~4870687396~~ 4870687357 DATE 9-25-12

OWNER Jackie Campbell APPLICANT: Clayton Homes PHONE: Home/Cell # 704-873-2547 Business # N/A

SITE ADDRESS 148 Highland Point Ave OWNER / APPLICANT ADDRESS 2026 Northside Drive

SITE DIRECTIONS Hwy 21 N TR Highland Point Ave. Property on Right

SUBDIVISION Eastern Heights BLOCK / SECTION NA LOT # 18-21 LOT AREA 1.04 acres DESIGN FLOW 360gpd L.T.A.R. existing

Septic Tank Existing Gallons: STB ____ Date ____
Pump Tank ____ Gallons: P T ____ Date ____
Pump Make ____ Model ____ Serial # ____
No. Nitrification Fields: 1 No. Lines 3 Linear Feet existing
Trench Width Ex Max. Trench Bottom Depth Ex Gravel Depth Ex

☐ New System ☐ Repair ☐ Expansion System Type I (II) III IV V VI
System Description: Conventional
Repair System Description: ____
Maintenance Agreement Required ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

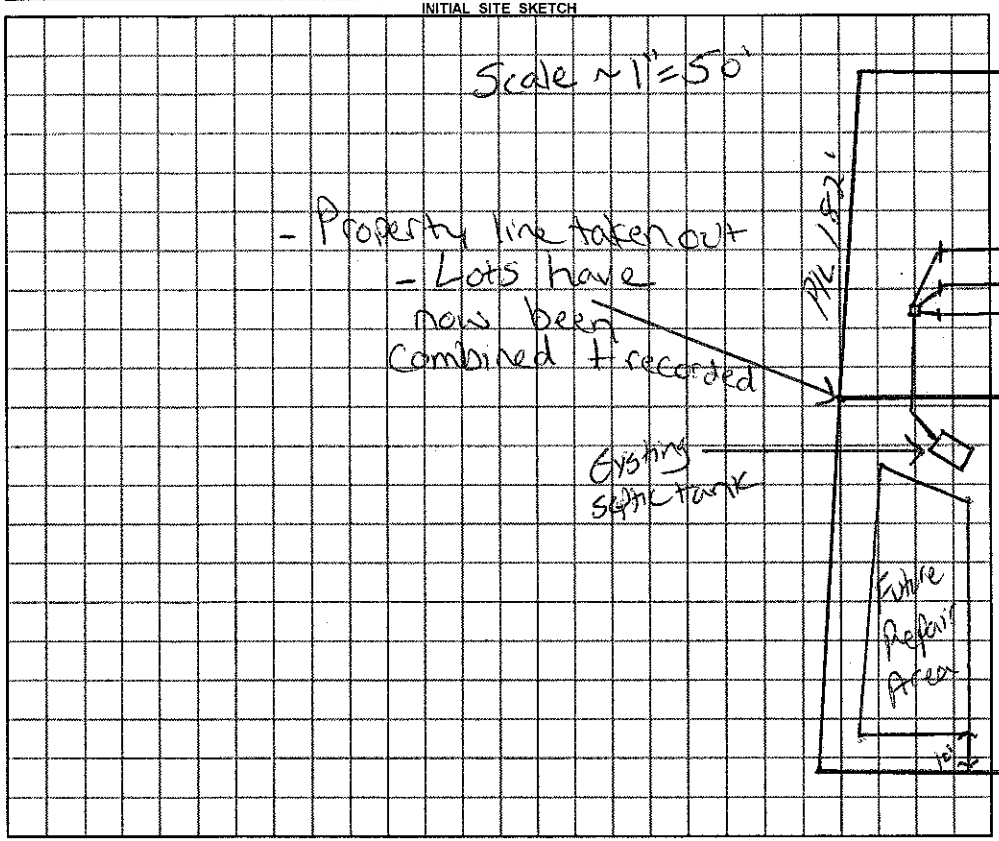
☑ Residence No. Bedrooms 3
☐ Business No. Persons ____
☐ Other No. Employees ____
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

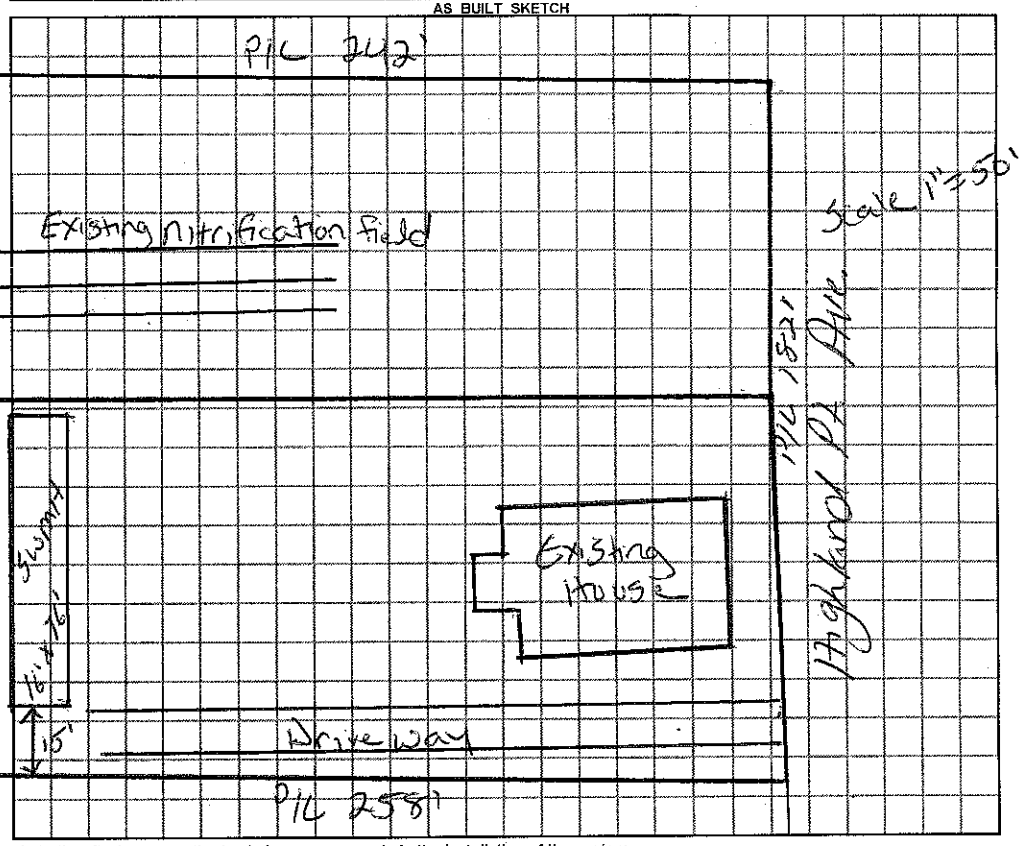
Comments / Conditions

- Maintain a minimum of 5' between home foundation and all components of septic tank system.

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 plat valid without expiration. site plan valid 60 mo. ☐ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Deena Alee Date 9/26/12 Installed by: ____

IMPROVEMENT PERMIT by: ____ ***REHS*** Date ____

AUTHORIZATION TO CONSTRUCT by: ____ ***REHS*** Date ____

OPERATION PERMIT by: ____ ***REHS*** Date ____

Existing System Inspected by: Justin Henderson ***REHS*** Date 9-25-12

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant