

CONSTRUCTION AUTHORIZATION

CLEVELAND COUNTY HEALTH DEPARTMENT
315 GROVER STREET, SHELBY, NORTH CAROLINA 28150
(704) 484-5130 Fax: (704) 484-5135

Cynthia Parker
Owner/Legal Representative

1206 Cleveland Ave.
Property Address

(704) 913-4431
Phone Number

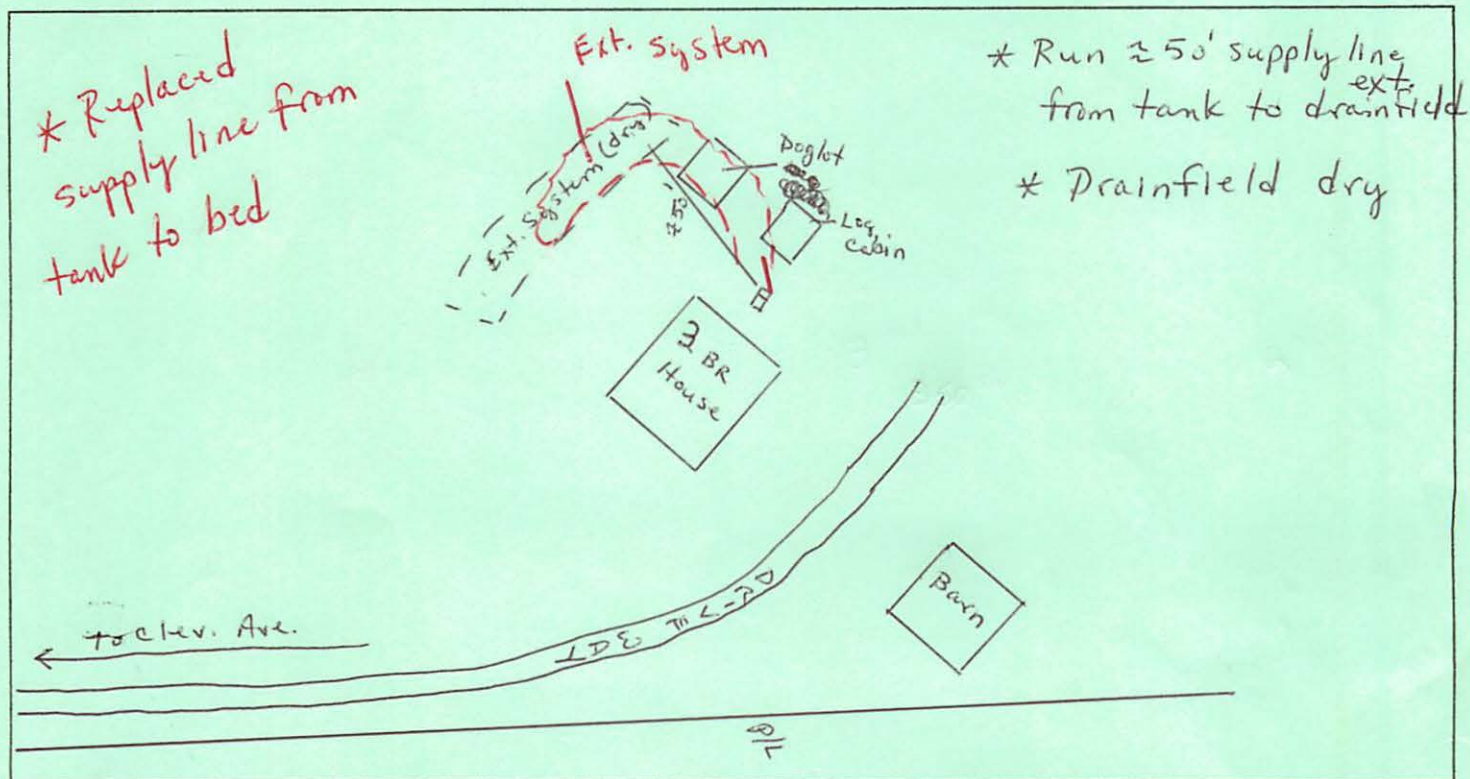
S/D-MHP

Lot Number

16.77 Ac.
Lot Size/Acreage

147447
Improvement Permit Number

This Construction Authorization as provided in G.S. 130A-335(f) and G.S.130-336(b) shall be valid for a period equal to the period of validity of the Improvement Permit, not to exceed 60 months.



Condition(s) of Issuance: Run ~50' supply line from septic tank, install according to all N.C. Laws & Regs. SW

New Installation ☒ Repair ☐ Expansion ☐ Change ☐
Single Family ☒ Multi-Family ☐ HSE ☐ MH ☐
Business ☐ Other ☐
Foundation: Crawl Space ☐ Slab ☐ Basement ☒
With ☒ Without ☐ Plumbing
Water Supply: New/Existing ☒ Spring ☐ Well ☐
Public/Municipal ☒ Private ☐ Community ☐
Well Permit No. _____

No. of bedrooms 3 No. of residents/employees 2 SW
Projected design flow 360 SW GPD LTAR _____
Wastewater System Type Ext. Insp. Freq. _____
Tank Size: Septic Ext. Pump Grease Trap _____
Sq. Footage Ext. No. of lines _____ Width _____ Length _____ Ft. on Center _____
Depth: Trench bottom _____ gravel _____ cover _____
Repair Wastewater System Type _____ 100% Y/N

THIS AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION SHALL BECOME INVALID, AND MAY BE SUSPENDED OR REVOKED, IF: THE INSTALLATION HAS NOT BEEN COMPLETED DURING THE PERIOD OF VALIDITY, THE INFORMATION SUBMITTED IN THE APPLICATION FOR A PERMIT OR CONSTRUCTION AUTHORIZATION IS FOUND TO HAVE BEEN INCORRECT, FALSIFIED OR CHANGED, OR THE SITE IS ALTERED.

Cynthia Parker
Owner/Legal Representative

6/28/13
Date

Shea Webster, R.S.
Authorized State Agent

6/27/13
Date

OPERATION PERMIT

Trent Rhea
OSWW Installer
CCHD#601 REV.02/08

Certification No.

Shea Webster, R.S.
Authorized State Agent

7/2/13
Date