IREDELL COUNTY HEALTH DEPARTMENT

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

3:00 - Final

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

PERMIT # 152619 PIN # 3783-39-4118 DATE 25 August 09

OWNER or APPLICANT Dale Dehart PHONE: Business (704) 402-2085 Home:

OWNER or APPLICANT ADDRESS 2464 Island Ford Rd Statesville, N.C

LOCATION / DIRECTIONS Hwy 40 W TR Shannon School Rd. TL Island Ford Rd. ON Rt. before Lake

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 0.86ac. DESIGN FLOW 360 gpd. L.T.A.R. 0.3/1779

Septic Tank 1000 Gallons: STB 825 Date 9-20-09

Pump Tank Gallons: PT Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 4 Linear Feet 300

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth

☑ New System ☐ Repair ☐ Expansion System Type I II III IV V VI

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☑ Crawl Space

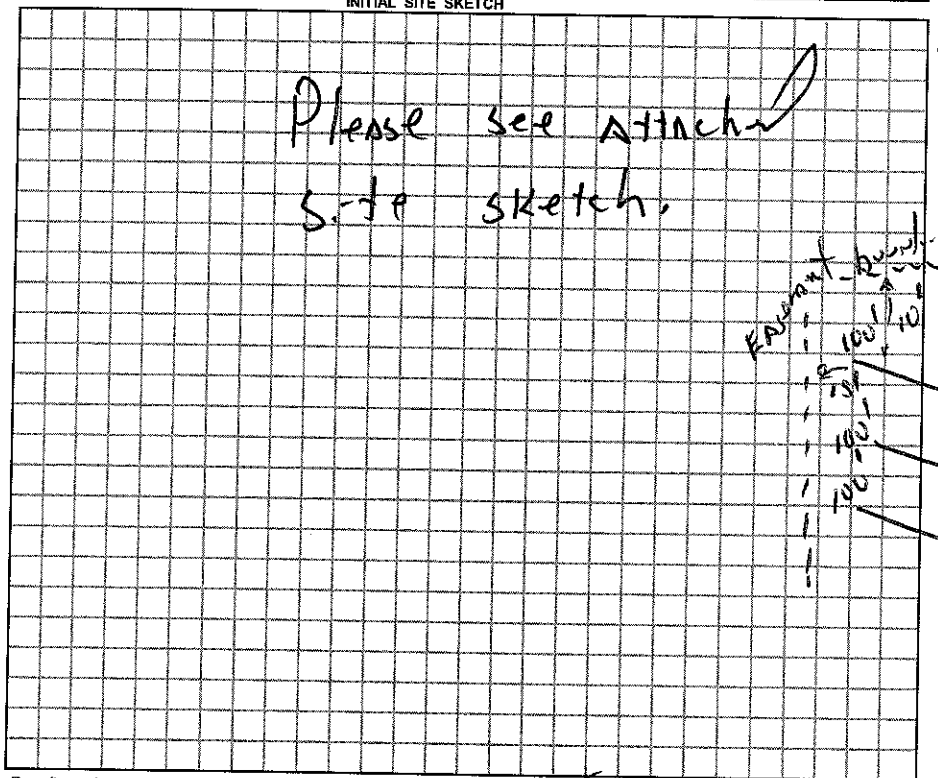
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private ☐ Public ☐ Community

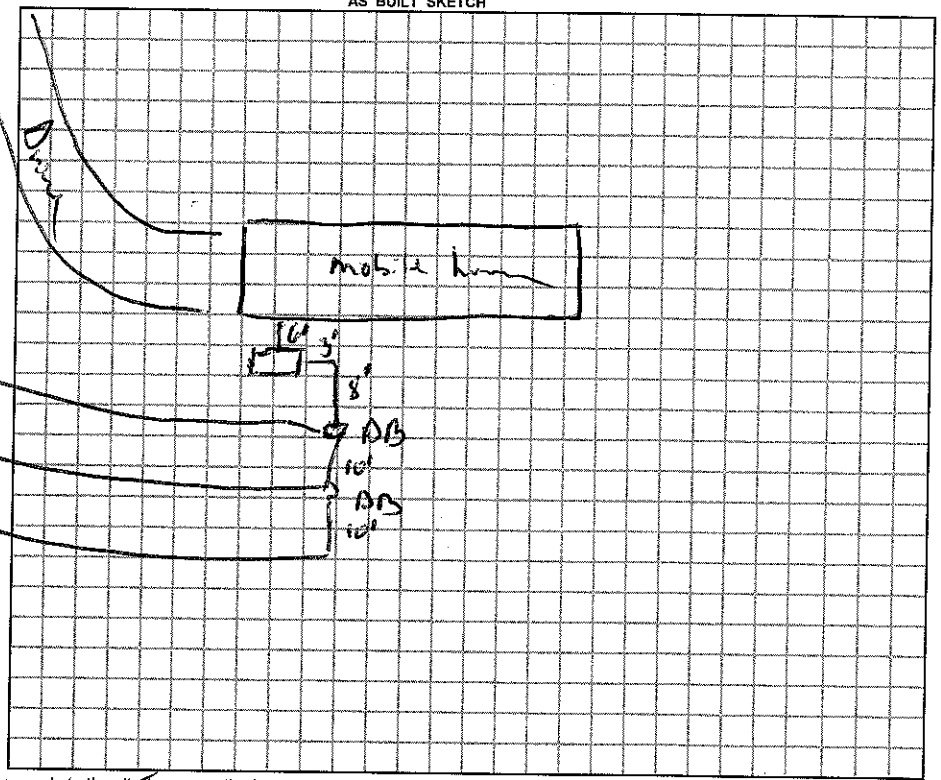
Comments / Conditions: Follow contour / Hunter setbacks / + Easement attached +

Comments / Conditions: Filter installed /

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

Owner / Applicant Signature: Dale Dehart Date 8-25-09

Improvement Permit by: [signature], R.S. Date 25 Aug. 09

Authorization to Construct by: [signature], R.S. Date 25 Aug. 09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Ryan Septic

Operation Permit by: [signature], R.S. Date: 4 Nov. 09

Existing System Inspected by: Date:

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant