IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 103324 PIN# 3783-85-2646 DATE 12/4/01

OWNER OR CONTRACTOR James Setzer (Joe Setzer) PHONE: Business (704) 873-4978 Home (704) 878-9243

ADDRESS 3223 Turnpike Avenue Statesville N.C. 28677

LOCATION I-40 W, (R) Shem School Rd, (R) 2nd part 2nd Brick House (L) between rocks on dirt road at Pond.

SUBDIVISION – BLOCK / SECTION – LOT – LOT AREA 21.42 Acres SITE CLASS V DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 312 Date 3-25-02
Pump Tank: 1000 Gallons: PT 283 Date 3-25-02
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 5 @ 80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

X New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Pump, Conventional
Repair System Description: Pump, Conventional
Maintenance Agreement Required: ☐ Yes ☐ No

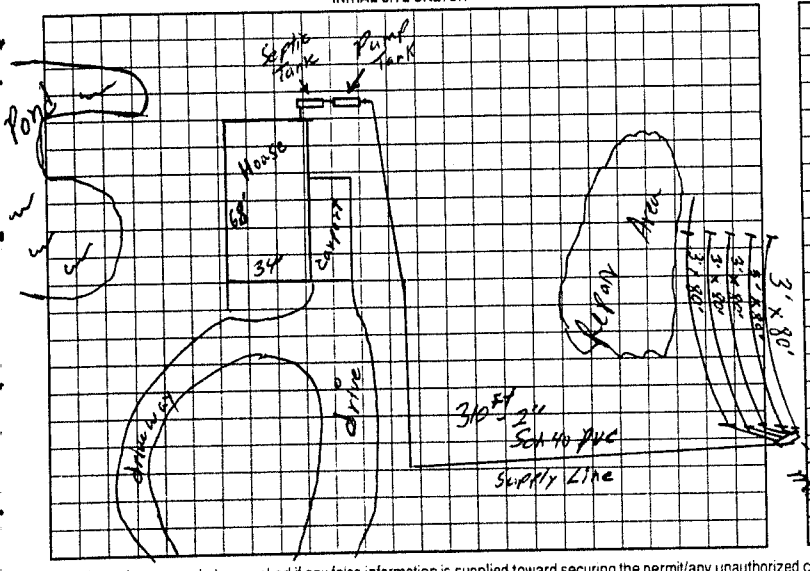
~~X~~ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: X Individual ☐ Public ☐ Community

Comments/Conditions: (1) do not install when wet (2) maintain proper setbacks - Keep Tanks + System 50 ft From pond

Comments/Conditions: -PT + ST - Inspected - Okay 4/30/02 (WOJ)
-Zabel Filter, Septic Tank marker installed - 4/30/02 (WOJ)
-lines Checked Okay - 5/9/02 WOJ
-Set pressure checked Floats Okay 6/5/02
-Electrical + Alarm Okay 6/6/02 BS

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Shown per Initial Site 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: Marie Setzer date ____
Improvement Permit by: William O Johnson date 12/12/01
Authorization to Construct by: William O Johnson date 12/12/01

Installed by: Charles Baity
Operation Permit by: William O Johnson date 6/6/02
Existing System Inspection by: ____ date ____

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