IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 155818 PIN # 3784-63-6997 DATE 23 April 09

OWNER or APPLICANT Alan Yount PHONE: ~~Business~~ Cell 704-880-8766 Home:

OWNER or APPLICANT ADDRESS 1014 Sharon School Rd.

LOCATION / DIRECTIONS Hwy 90W TR Sharon School Rd. @ 2nd House on RT - past New Sterling Rd.

SUBDIVISION BLOCK / SECTION LOT # LOT AREA DESIGN FLOW L.T.A.R.

Septic Tank Exist Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields No Lines Linear Feet

Trench Width Max. Trench Bottom Depth Gravel Depth

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

System Description: Exist

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

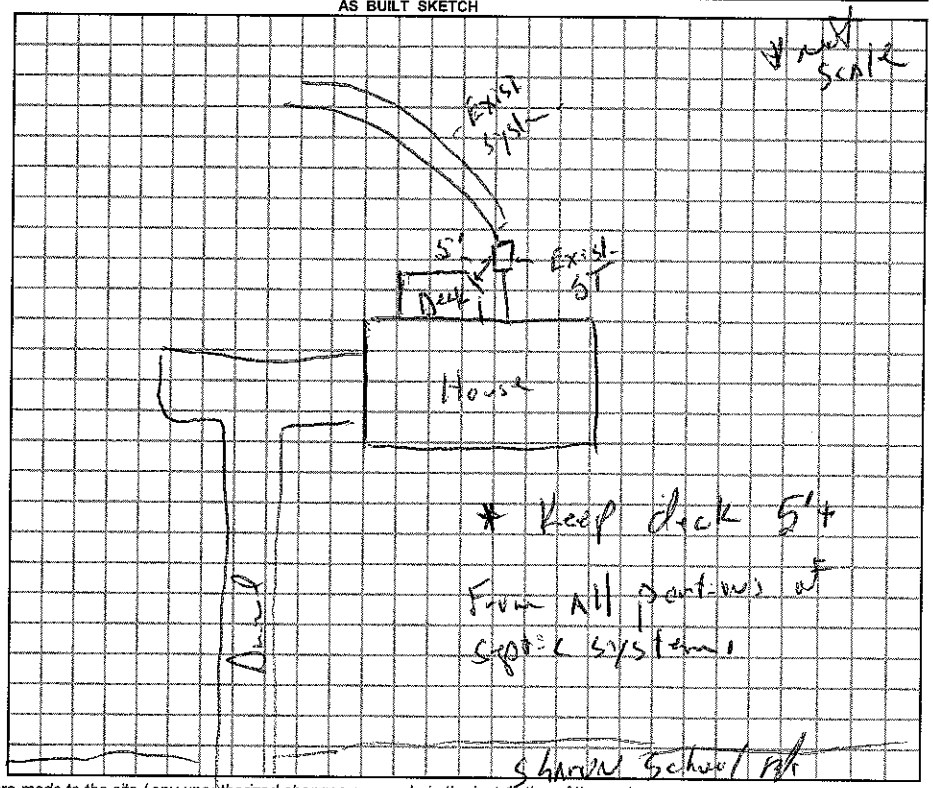
Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions

Comments / Conditions Deck addition will not impact the existing septic or repair areas.

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: Alan Yount Date 4-23-09

Improvement Permit by: Date

Authorzation to Construct by: Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by:

Operation Permit by: Date:

Existing System Inspected by: J. Huggins, R.S Date: 23 Apr 09

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