IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# Repair PIN# ~~3785-67-9400~~ 3785-67-9400

OWNER OR CONTRACTOR Denise Howard PHONE: ~~Business~~ Home (704) 880-6879 DATE 9/24/03

ADDRESS 107 Rockwood Drive Lenoir NC 28645 Home (704) 978-3005

LOCATION I-40 W (R) at mm Rd (L) Presley Farm Rd ~1 mile on Left @ Sharp curve 2-Story white House @ 387 Presley Farm Rd.

SUBDIVISION ____ BLOCK / SECTION ____ LOT ____ LOT AREA Acreage SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. Ex

Septic Tank: 1,000 Gallons; STB 1012 Date 4-5-03

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet Ex Linear Feet Ex

No Lines Ex Trench Width ____ Max Trench Bottom Depth ____ Gravel Depth ____

☐ New System ☒ Repair System Type: I, (II) III, IV, V, VI

System Description: Gravity Conv

Repair System Description: Replace Septic Tank

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 2 No. Employees ____

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

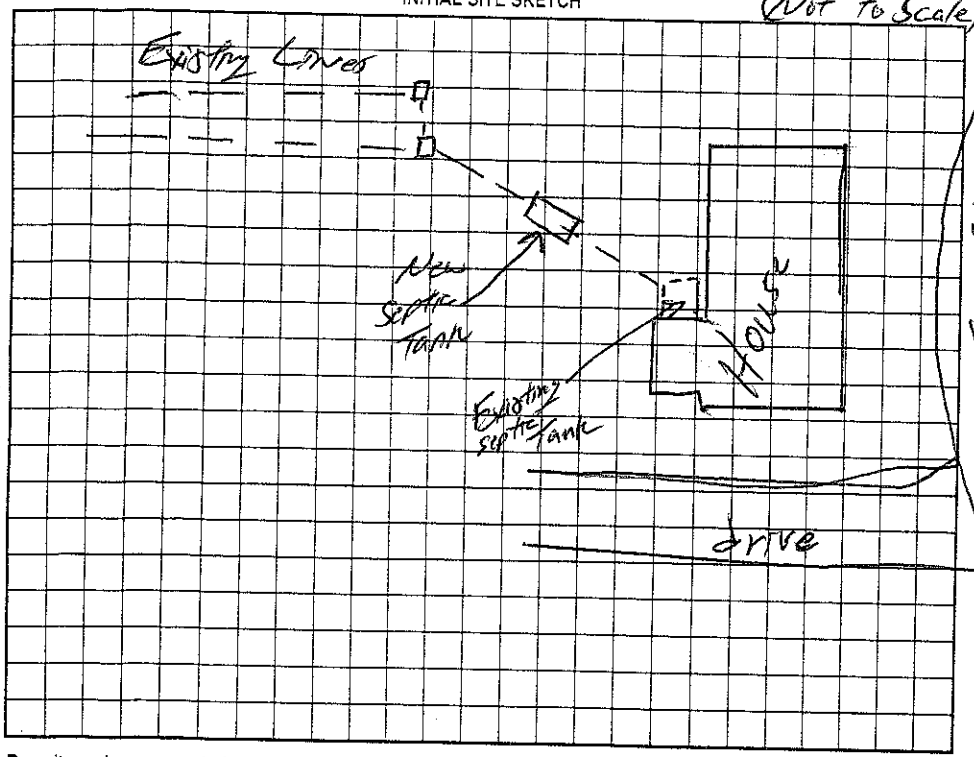
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: (1) Pump out Existing Septic Tank, Crush + Fill old tank (2) Set new tank away from House toward septic field area. (3) This permit serves as Notice of Violation; 30 days to have repair completed from date of permit.

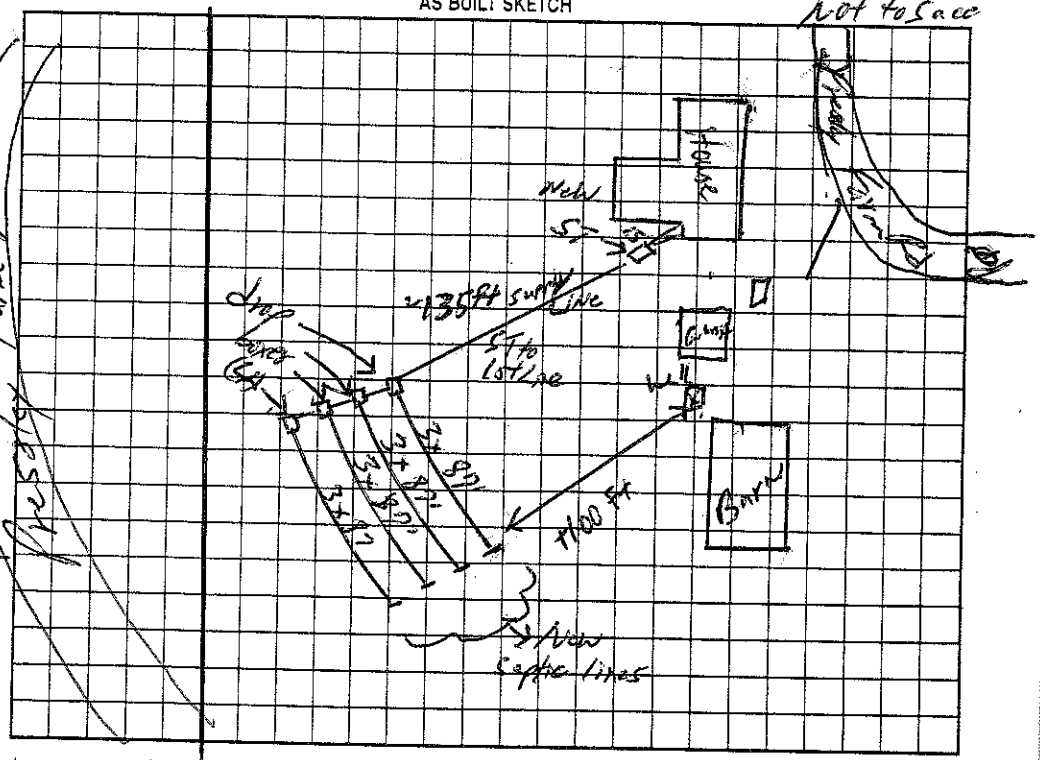
Comments:/Conditions: New Tank + Tuff-Tite Filter Installed Ok 10/21/03

348 ft Infiltrator Installed (10/22/03) okay

INITIAL SITE SKETCH (Not to Scale)



AS BUILT SKETCH not to Scale



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: Denise Howard date 9/24/03

Improvement Permit by: William O. Johnson date 9/24/03

Authorization to Construct by: William O. Johnson date 9/24/03

Installed by: Steve Jordan

Operation Permit by: William O. Johnson date 10/22/03

Existing System Inspection by: ____ date ____

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