IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 212833

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

PIN # 3792133173

APPLICANT: MARSHALL MEYERS APPLICANT ADDRESS: 129 HILEATH DR MOORESVILLE

SITE ADDRESS: 4345 HICKORY HWY STATESVILLE PHONE: ALT. PHONE:

SITE DIRECTIONS: HWY 70 W - ON LT PAST STATESVILLE BRICK - # 4345

SUBDIVISION: SECTION: LOT # LOT AREA: 1AC DESIGN FLOW: 360 L.T.A.R.: EXISTING

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 720 Linear Ft: 240

Trench Width 2 Max. Trench Bottom Depth EXISTING Gravel Depth EXISTING

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

System Description: GRAVITY CONVENTIONAL

Repair System Description:

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons 2

☐ Other No. Employees

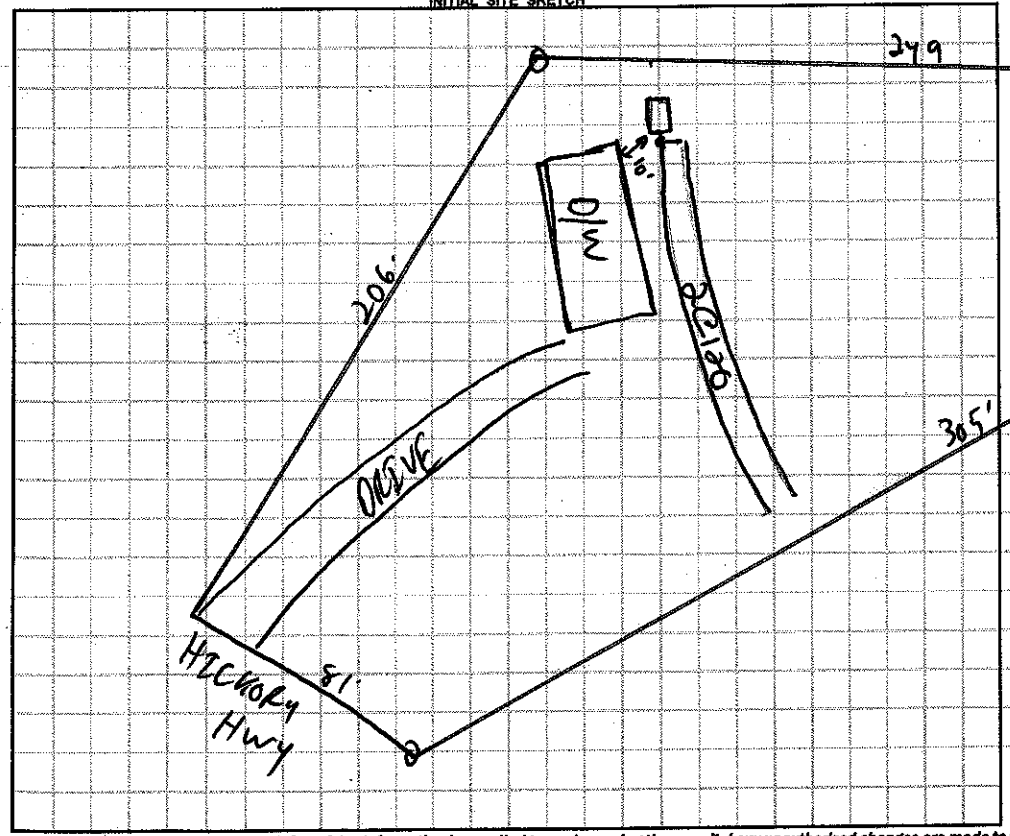
☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

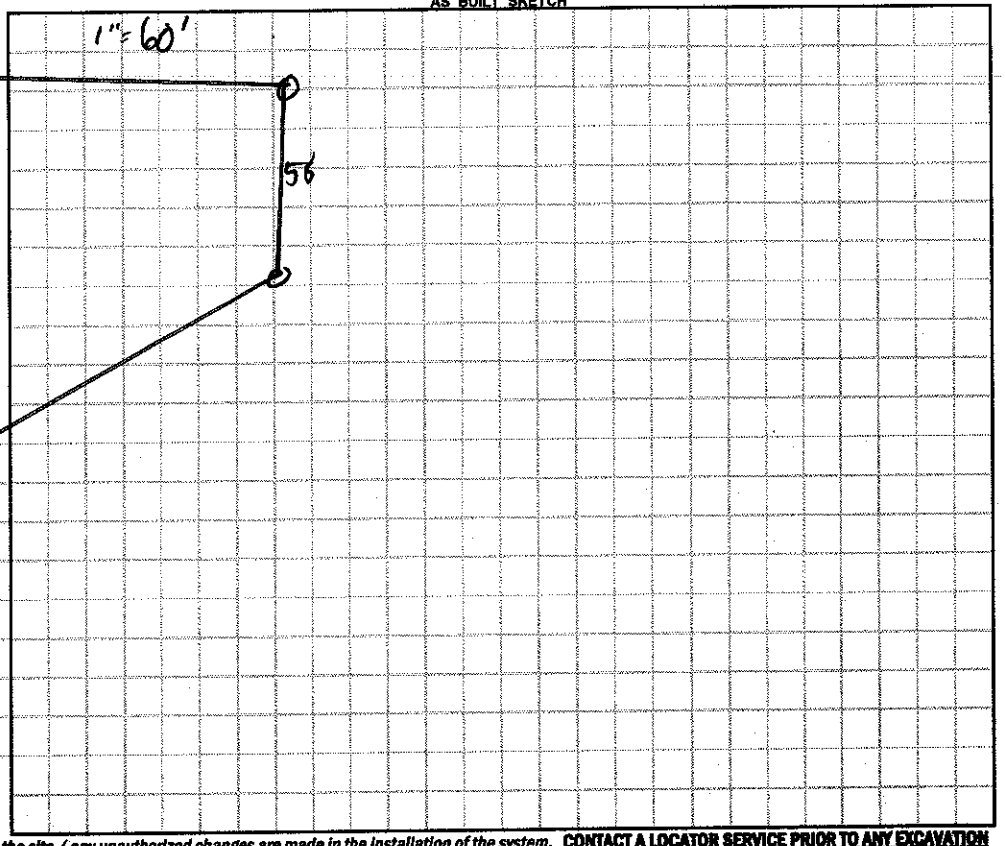
Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions:

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: Date: 9/14/15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 9/8/15

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK