IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 80903 PIN# 3792780231

OWNER OR CONTRACTOR JACKIE EDWARDS PHONE: Business 828 461-1589 Home DATE 5-10-99

ADDRESS PO Box 9333 Hickory NC

LOCATION Hwy 70 West (R) Ashley Acres Drive on left 400 ft house on left follow drive to end

SUBDIVISION BLOCK / SECTION LOT LOT AREA 2.9 Ac SITE CLASS P5 DESIGN FLOW 360 L.T.A.R. .33

Septic Tank: 1000 Gallons; STB 1007 Date 2-22-01

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1100 Linear Feet 360

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Conv Gravity

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

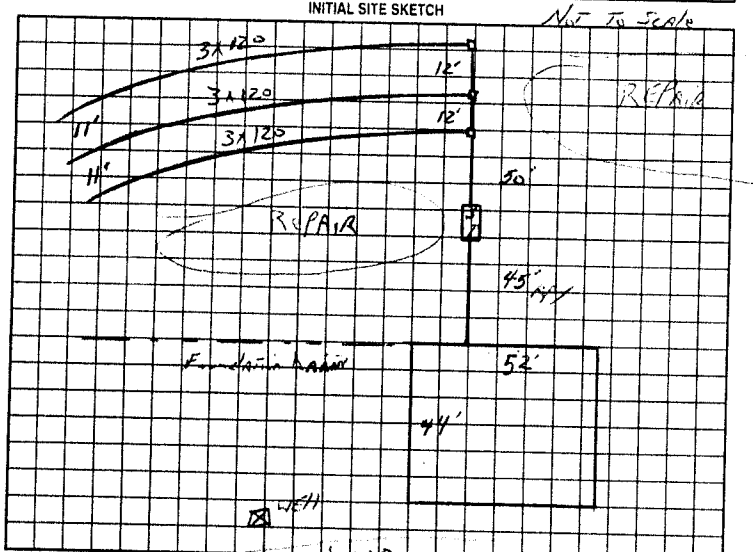
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community WELL

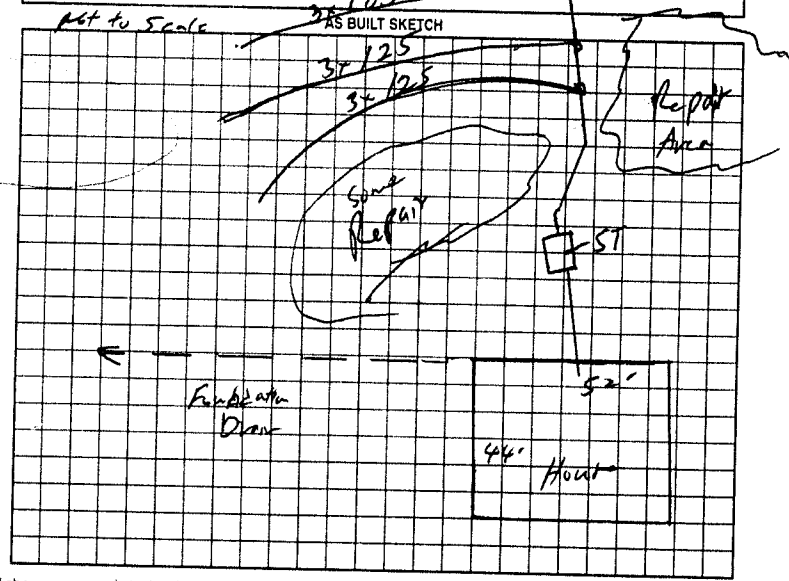
Comments/Conditions: INSTALL LINES ON CONTOUR
Keep 100 Ft From well

Comments/Conditions:
- Poly Lok Filter Installed
- Tank Riser Inside
- Well Not installed at time of Final Inspection.

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: Jackie Edwards date 5.10.99

Improvement Permit by: J.C. Potter date 5.10.99

Authorization to Construct by: J.C. Potter date 5.10.99

Installed by: Uniform Grading

Operation Permit by: William B. Johnson date 4/26/01

Existing System Inspection by: date

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