IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☐ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # 171928 PIN # 3793-81-9395 DATE MAY 8, 2012

OWNER KENNETH JAMES APPLICANT: SAME PHONE: Home/Cell # 704-924-6822 Business # 704-818-7303

SITE ADDRESS 3746 HICKORY HIGHWAY OWNER / APPLICANT ADDRESS SAME

SITE DIRECTIONS US 70 WEST, ON RIGHT AT BOX # 3746

SUBDIVISION NA BLOCK / SECTION NA LOT # NA LOT AREA 2.209 Acres DESIGN FLOW 240 L.T.A.R. EXISTING

Septic Tank EX Gallons: STB ____ Date ____

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

No. Nitrification Fields: 1 No. Lines 1 Linear Feet ~75'

Trench Width EX Max. Trench Bottom Depth EX Gravel Depth N/A

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: ____

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 2

☐ Business No. Persons ____

☐ Other No. Employees ____

☐ Slab ☐ Crawl Space

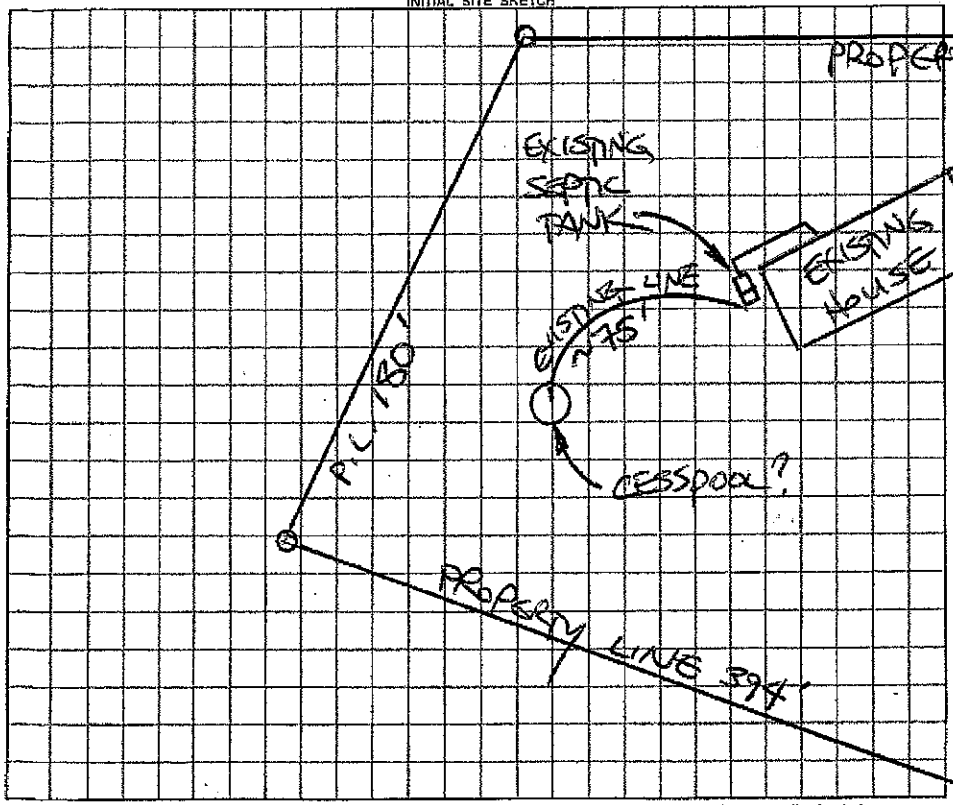
☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

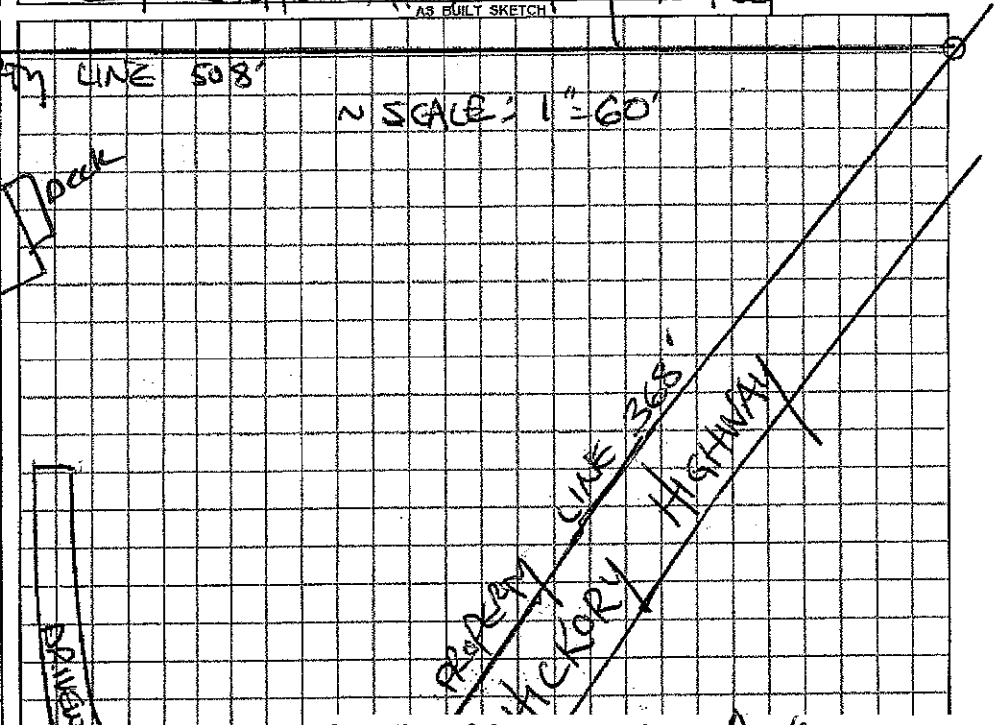
Comments / Conditions

EXISTING SYSTEM APPEARS TO BE COMPRISED OF A CONCRETE SEPTIC TANK & ONE DRAIN-LINE of CINDERS & SAND ENDING IN A POSSIBLE CESSPOOL AFTER APPROX/MATELY 75 FEET.

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed Deck addition does not appear to impact the existing on-site septic system.**NOTE:

REHS

Date: 8-21-13

ICHD-Environmental Health Division

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 a...

☐ *IMPROVEMENT PERMIT with plat valid without expiration.* ☐ *IMPROVEMENT PERMIT with plat valid without expiration. site plan valid 60 mo.* ☐ AUTHORIZATION TO...

Owner / Applicant Signature: ____ Date ____

IMPROVEMENT PERMIT by: ____ REHS Date ____

AUTHORIZATION TO CONSTRUCT by: ____ REHS Date ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

Installed by: ____

OPERATION PERMIT by: ____ REHS Date ____

Existing System Inspected by: STEVE HENRICK REHS Date 5/8/12

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant