IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 87923 PIN# 3794611170 pt DATE Feb 23 2000

OWNER OR CONTRACTOR Tony STROUD PHONE: Business _____ Home 873 2547

ADDRESS 2026 Northside DR STATESville NC

LOCATION Old MT Rd NTH (L) 1st And End (L) Bobie (R) MARISTone 2nd STREET (R) LOT on R Right

SUBDIVISION FEATHERSTone BLOCK / SECTION 11 LOT 29 LOT AREA .69 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 10 30 99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 5 Trench Width 36" Max Trench Bottom Depth 32-36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I. II. III. IV. V. VI
System Description: Conv. GRAVITY
Repair System Description: GRAVITY Reduction
Maintenance Agreement Required: ☐ Yes ☑ No

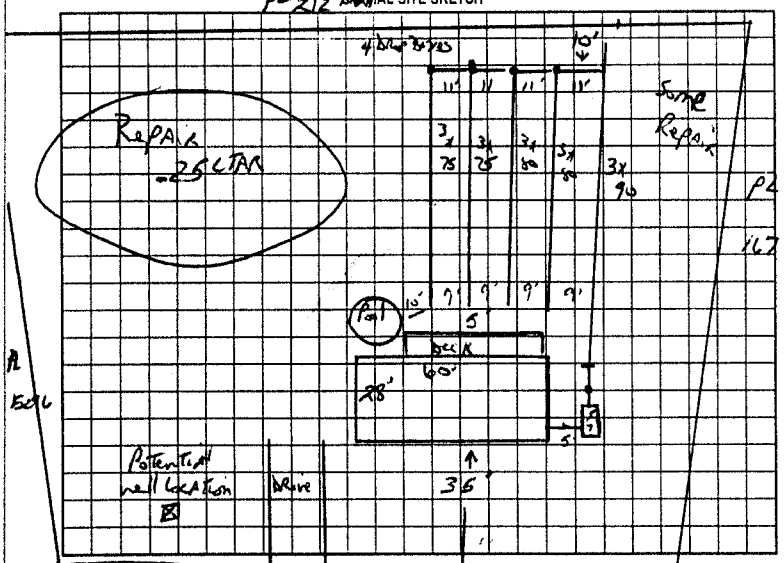
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
Well

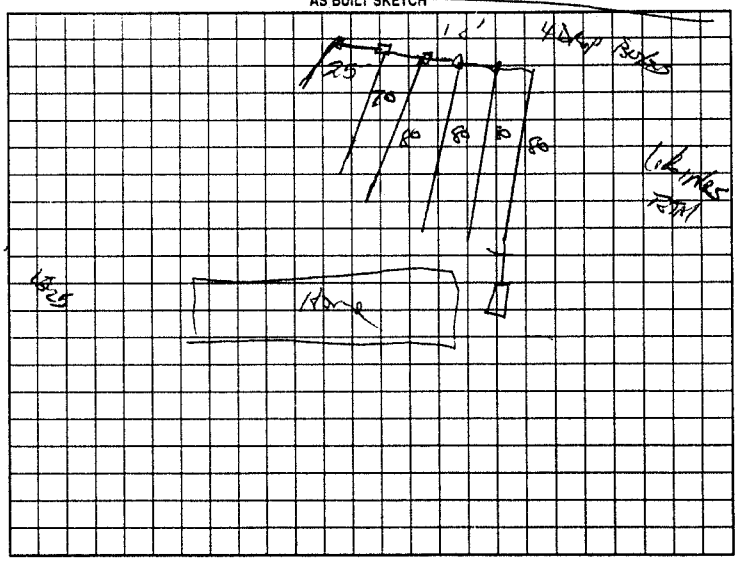
Comments/Conditions: 4 Drop Boxes (5 TOTAL)
Locate well 100ft OR MAX FEASible distance (50ft min) from Septic. START 1st Line AS FAR up hill AS Possible

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. 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: Tony Stroud date 2/23/00 Installed by: A/ Backhoe

Improvement Permit by: J. L. Potter date Feb 23 2000 Operation Permit by: J. L. Potter date Feb 28 2000

Authorization to Construct by: J. L. Potter date Feb 23 2000 Existing System Inspection by: _____ date _____

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