7:30 - 3:00

IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 7-20-99

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

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

PERMIT# 081506 PIN# 3795 38 1811 DATE 9-21-00

OWNER OR CONTRACTOR STIKELEATHER & ASSOC. PHONE: Business 876-6847 Home

ADDRESS P.O. BOX 6286 STATESVILLE, NC 28687

LOCATION I-40 WEST, TR OLD MOUNTAIN ROAD, LOT #4, PAST MIRACLE FARM ROAD

SUBDIVISION STONY DELL BLOCK / SECTION I LOT 4 LOT AREA 0.52 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 sqft/ft²

Septic Tank: 1000 Gallons; STB 1000 Date 8/15/00

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet EQ. TO 1250 Linear Feet 300'

No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Depth SAND 6"

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

System Description: 25% REDUCTION SYSTEM

Repair System Description: 50% REDUCTION PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

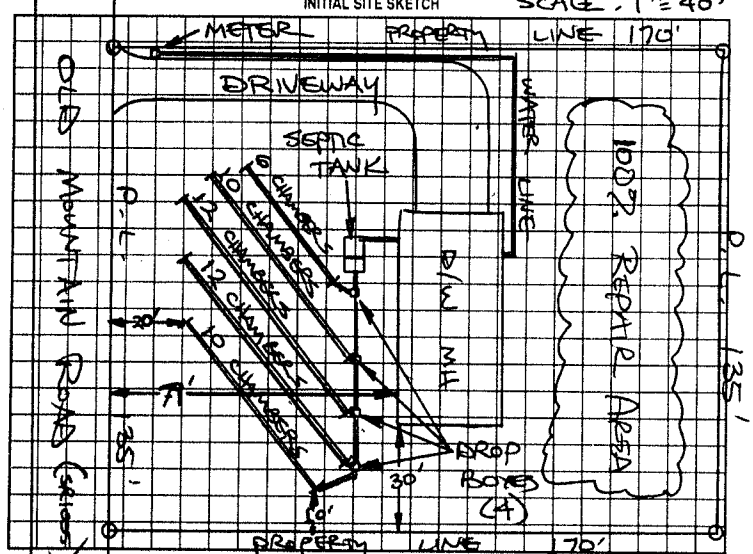
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: ① KEEP SYSTEM MINIMUM TEN FEET FROM WATER LINE. ② INSTALL 25% REDUCTION SYSTEM USING 50 CHAMBERS.

Comments/Conditions:

INITIAL SITE SKETCH SCALE: 1" = 40'



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: Kelly J Cockeram date 9/21/00 Installed by: TOMMY CATHEAN

Improvement Permit by: STEVE HEDRICK date 9-21-00 Operation Permit by: C. Kelly K RS date 10/2/00

Authorization to Construct by: STEVE HEDRICK date 9-21-00 Existing System Inspection by: date

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