# IREDELL COUNTY HEALTH DEPARTMENT

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

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

125' 1:30

PERMIT# 094747 PIN# 4624888675

OWNER OR CONTRACTOR Frank & Nancy Boykin DATE 3/20/2001

ADDRESS P.O. Box 1926 Banner Elk, NC 28604 PHONE: Business _____ Home (828) 387-2069

LOCATION Brawley School Rd TL Yacht Rd on Rt across from Yacht Club

SUBDIVISION Yacht Harbour BLOCK / SECTION _____ LOT 9 LOT AREA .47 Acre SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .325

Septic Tank: 1000 Gallons; STB 794 Date 11-8-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 840' Linear Feet 280'

No Lines 4 at 70' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Gravity - 25% Reduction

Repair System Description: Pump - LP - Pavel Block

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2.5 No. Employees ____

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

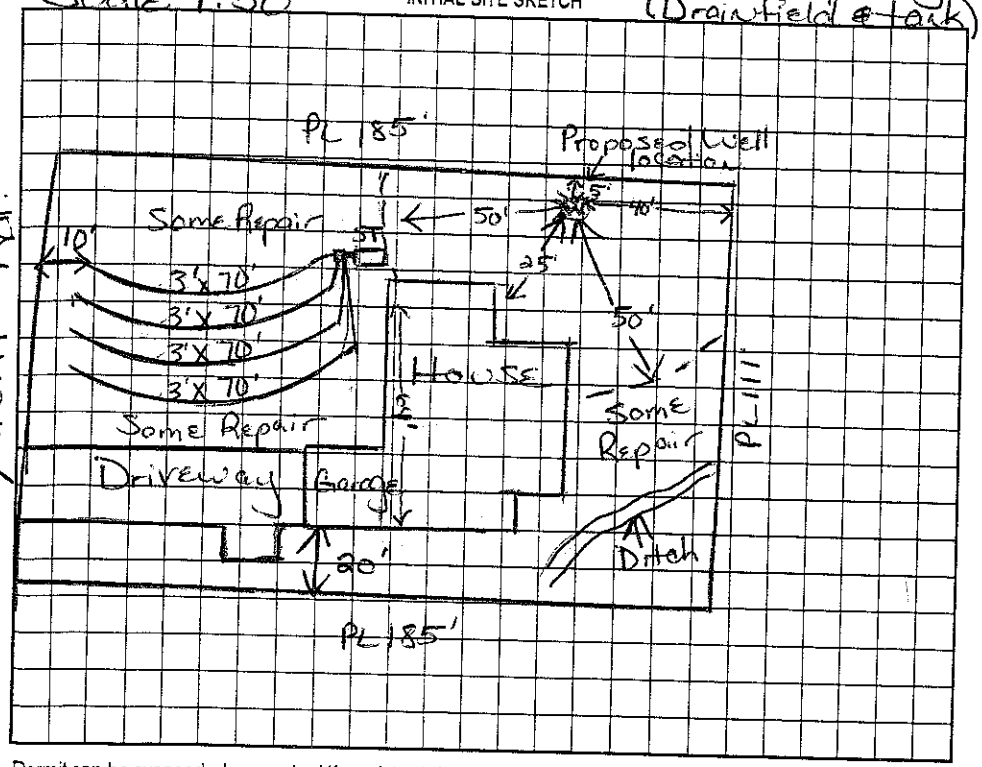
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Keep Septic System at least 10' from PL, 5' from house & 50' from any well. Keep well 25' from House & 50' from Septic System (Drainfield & tank)

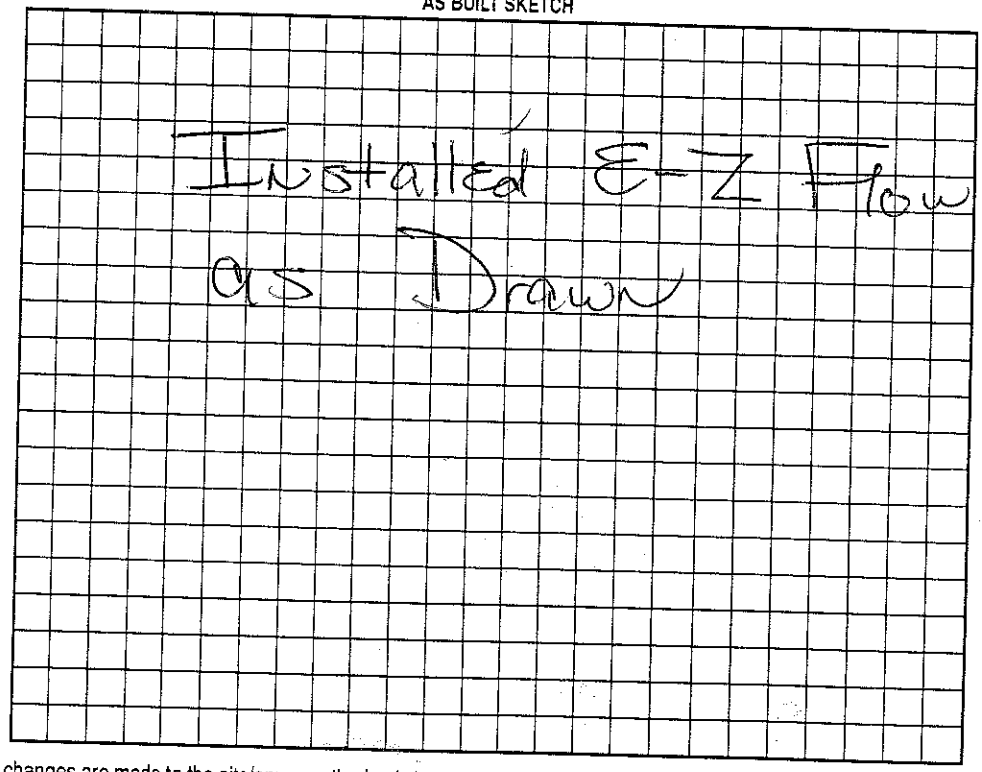
Comments/Conditions: Note: Permit allows for "Repair drainline" between Initial Drainfield & Driveway. Divert surface water/Storm water away from Drainfield.

INITIAL SITE SKETCH

SCALE 1:50




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: Frank M Boykin date _____ Installed by: B W Christenbury

Improvement Permit by: Maria H Dotson RS date 3/20/2001 Operation Permit by: Maria H Dotson RS date 6/27/2001

Authorization to Construct by: Maria H Dotson RS date 3/20/2001 Existing System Inspection by: _____ date _____

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