IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210248

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

PIN # 4629-94-6630

APPLICANT: Chris STROM/STROM CONST. APPLICANT ADDRESS: 2343 Crofte Dr Sherrills Ford NC

SITE ADDRESS: 479 Stillwater Rd PHONE: 704-506-4000 ALT. PHONE:

SITE DIRECTIONS: Hwy 115 S, TR on Perth, TR on State Park, TL on Morrison Farm, TL on Stillwater, Lot on L past Denim

SUBDIVISION: CLAT SECTION: 17 LOT # 67 LOT AREA: 0.86ac DESIGN FLOW: 360 L.T.A.R.: Existing Cnt

Septic Tank EXIST. (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields EXIST # Lines 2 Linear Ft: 240

Trench Width 36" Max. Trench Bottom Depth EXIST. Gravel Depth EXIST

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

System Description: Gravity Conventional

Repair System Description:

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☐ Residence ☐ Business ☑ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees

☐ Crawl Space ☐ Basement w/o plumbing

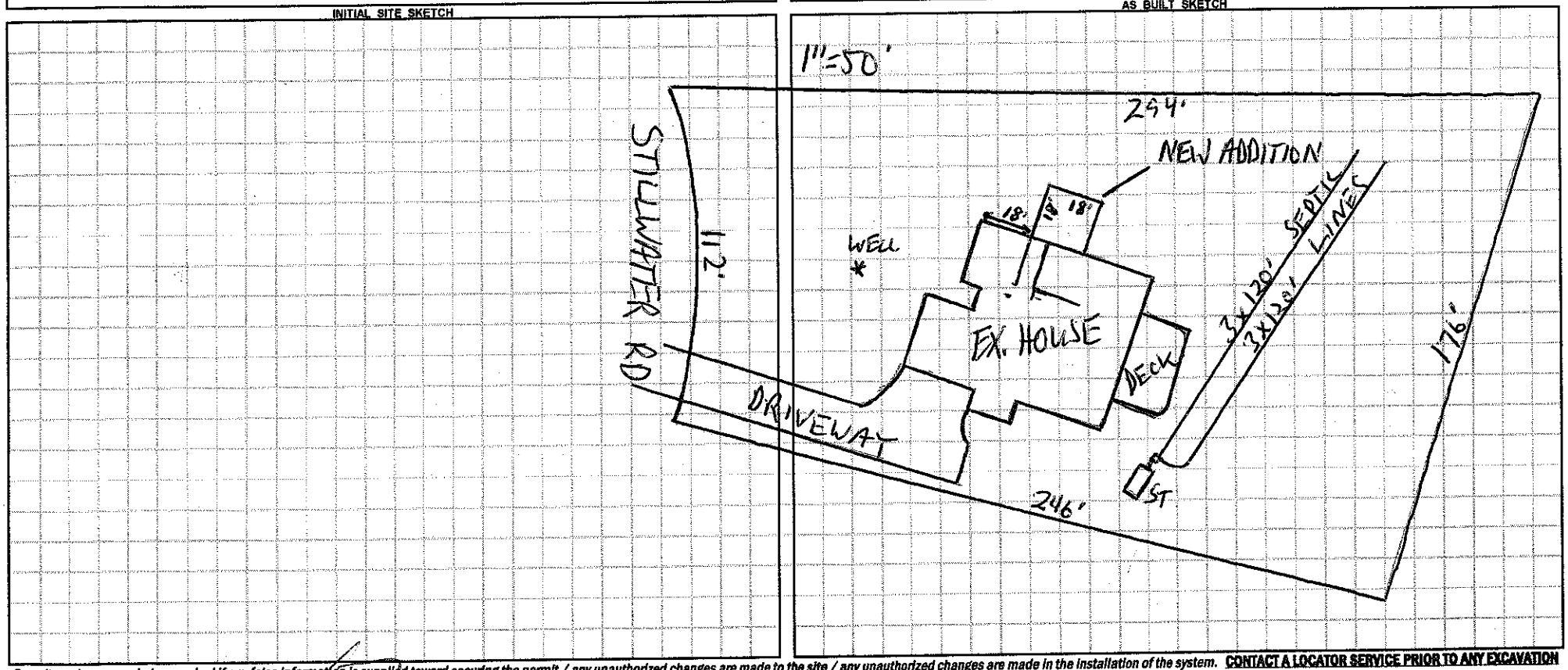
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

ADDITION OF A SEWING ROOM/ 3rd Bedroom, One EXISTING BEDROOM TO BECOME NEW MASTER CLOSET AND HALLWAY TO NEW ADDITION

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 6-2-15 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 5-26-15

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK