IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213367

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

PIN # 4636-78-8456

APPLICANT: ROBERT HOPKINS JR. APPLICANT ADDRESS: 637 BEATEN PATH RD.

SITE ADDRESS: 154 WEBBED FOOT RD. PHONE: 704-361-3827 ALT. PHONE:

SITE DIRECTIONS: BSR, CANVASBACK, TR WEBBED FOOT

SUBDIVISION: MALLARD HEAD CC SECTION: -1- LOT # 4 LOT AREA: .47 AC DESIGN FLOW: 360 L.T.A.R.: .3

Septic Tank Ex. 1000 (gal) STB Date

Pump Tank Ex. 1000 (gal) PT Date

Pump Make Model Serial #

Nitrification Fields Ex. # Lines Linear Ft:

Trench Width Max. Trench Bottom Depth Gravel Depth

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

System Description: PM - PANEL BLOCK

Repair System Description: SAME

Maintenance Agreement Required: ☐ YES ☑ NO

☐ GRAVITY ☑ PRESSURE

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

No. Bedrooms 3 No. Persons No. Employees ☐ Crawl Space

Water Supply: ☐ Private ☐ Public ☑ Community

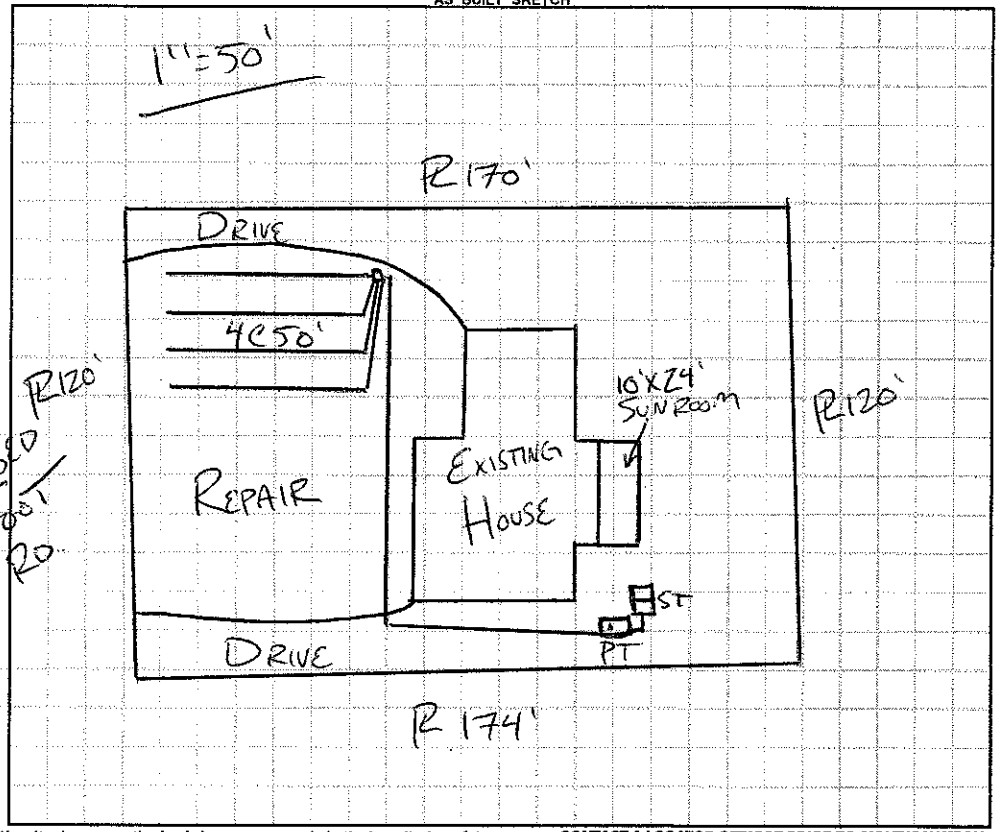
☐ Basement w/o plumbing

Comments / Conditions:

SUNROOM

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: Robert Hopkins Date: 10-21-15 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: RA Date: APPROVED OCT 20 2015

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