IREDELL COUNTY HEALTH DEPARTM...

STATESVILLE 704-8 MOORESVILLE 704-664-5281

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

PERMIT# 122202 PIN# 4639 61 5556 . 083 DATE 3/24/05

OWNER OR CONTRACTOR Keaney Const. PHONE: Business 704-883-9811 Home

ADDRESS PO Box 5159 Statesville NC. 28687

LOCATION Perth N To Livaln. TR Bay Crossing TR Tea Olive on (R)

SUBDIVISION Bay Crossing BLOCK / SECTION 1 LOT 83 LOT AREA .71 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 400

No Lines 5 @ 80' Trench Width 3' Max Trench Bottom Depth 32" Gravel Depth No

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI

System Description: Presbyter, .25% Rotund

Repair System Description: 16" PPBPS

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 4

[ ] Mobile Home No. Bathrooms 4

[ ] Business No. Employees

[ ] Other

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

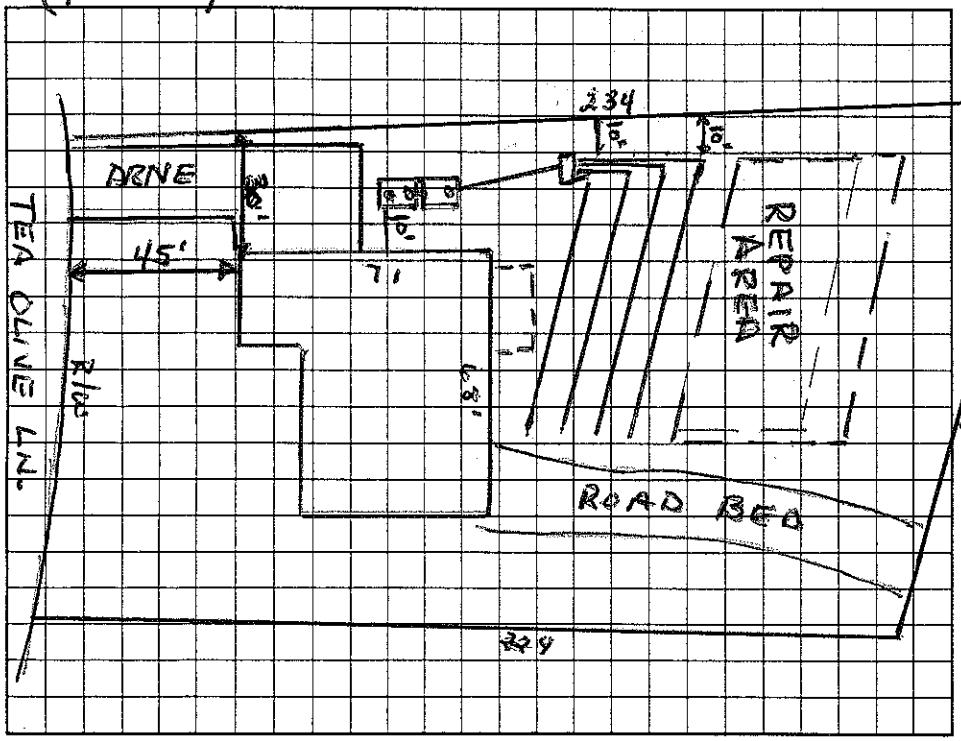
Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions:

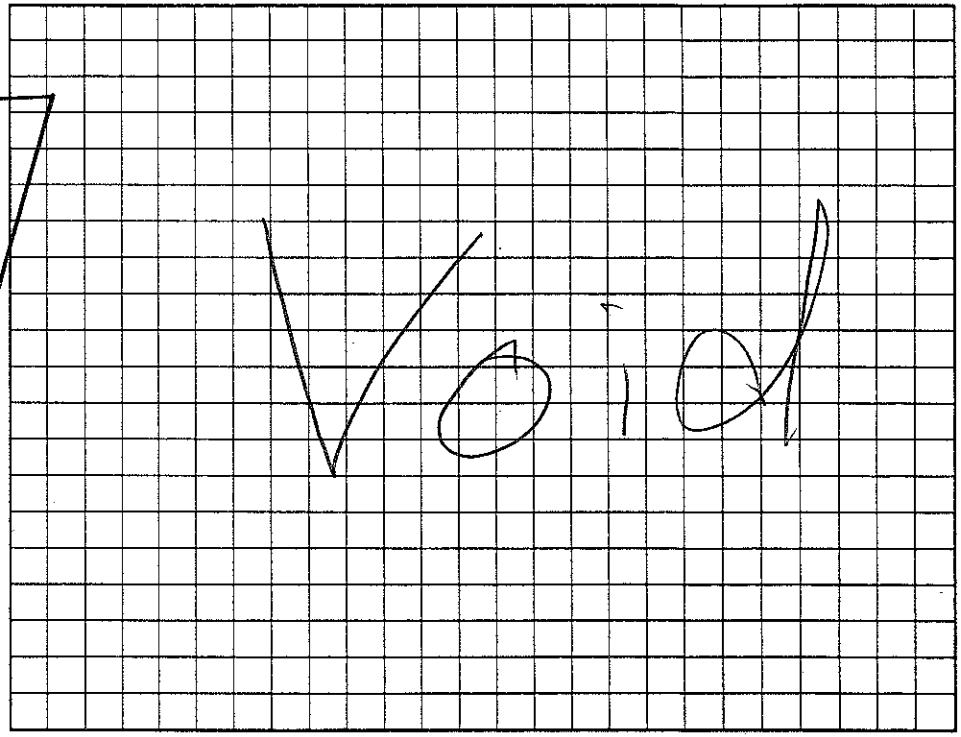
Comments:/Conditions:

(1" = 50')

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: X date Installed by:

Improvement Permit by: Wesley Sparks RS. date 3/24/05 Operation Permit by: date

Authorization to Construct by: Wesley Sparks RS. date 3/24/05 Existing System Inspection by: date

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