IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 092070 PIN# ~~4702-89-5559 (PT)~~ 4702-89-3514 DATE 5-25-02

OWNER OR CONTRACTOR CLAUDETTE BALLARD PHONE Business 704-450-1088 Home 704-878-6772

ADDRESS 2032 HAZELWOOD DR STATESVILLE NC 28625

LOCATION I-40 WEST TL OLD MTN. RD, TR LEWIS FERRY RD, TL PINEDELL, TR SEBASTIAN, LOT AT END ON LEFT

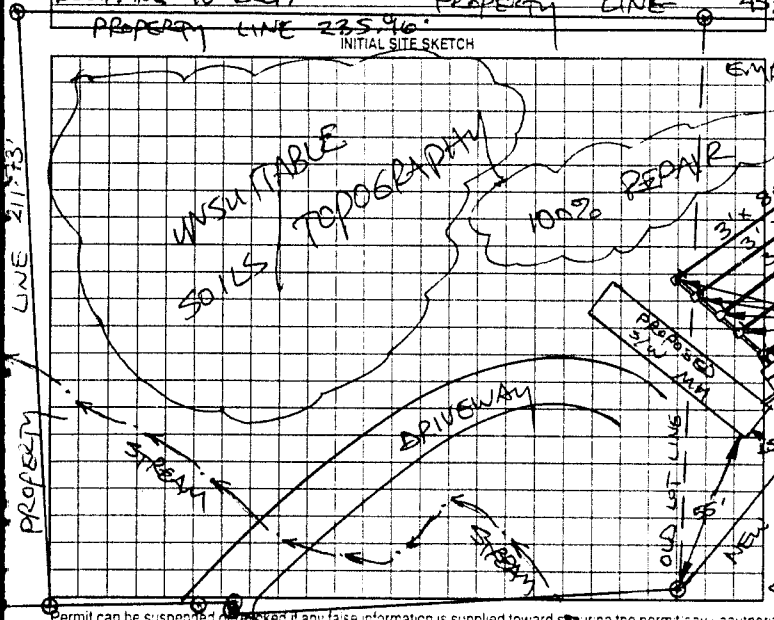
SUBDIVISION JEFFERSON LANDING BLOCK / SECTION ____ LOT 21 (10) LOT AREA 1.410 ACRES SITE CLASS P3 DESIGN FLOW 360 LTAR 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 312 Date 5-14-02	✓ New System Repair System Type I II III IV V	House/Mod Home	No Bedrooms 3	Water Supply
Pump Tank: ____ Gallons: PT ____ Date ____	System Description CONVENTIONAL, GRAVITY	✓ Mobile Home	No Bathrooms 2	☐ Individual
Pump Make: ____ Model ____ Serial No ____	Repair System Description 50% REDUCTION (10%)	Business	No Employees ____	✓ Public
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400	Maintenance Agreement Required Yes ~~No~~ PRESSURE	Other ____		☐ Community
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"	Slab ~~Crawl Space~~	Basement w/plumbing	Basement wo/plumbing	

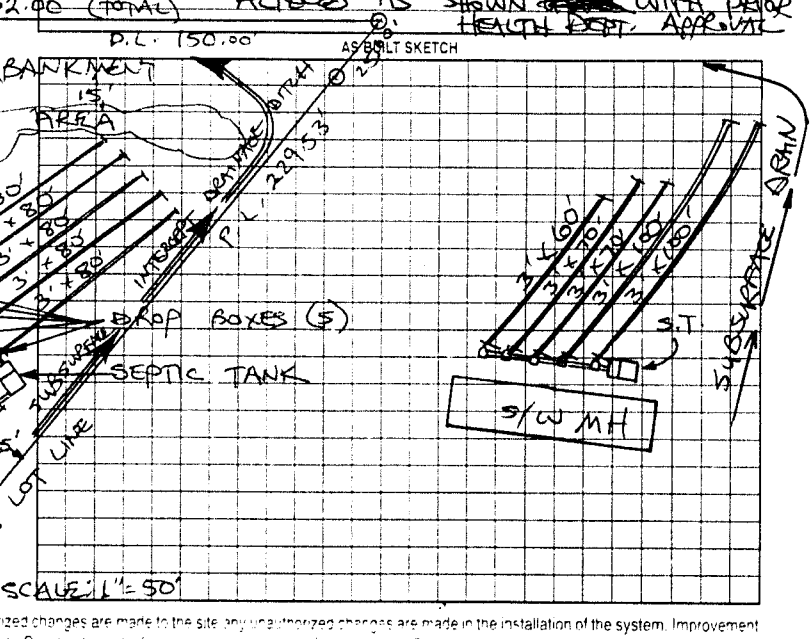
Comments/Conditions ① OLD LOT #10, NOW LOT #21
② CONSTRUCT SUBSURFACE INTERCEPT DRAINAGE DITCH AS SHOWN BEGINNING 48" DEEP.

Comments/Conditions ① SEPTIC TANK WITH RISERS & MARKER INSTALLED USING "ZABEL" FILTER ② SYSTEM ALTERED AS SHOWN ~~ON~~ WITH PRIOR HEALTH DEPT. APPROVAL

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: Claudette Ballard date 5/31/02 Installed by KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 5-25-02 Operation Permit by STEVE HEDRICK date 8-20-02

Authorization to Construct by: STEVE HEDRICK date 5-25-02 Existing System Inspection by: ____ date ____

CLC-DE-SAC

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