IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 9-5-00

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

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

PERMIT# 091246 PIN# 4702895559 (PART) DATE 10-4-00

OWNER OR CONTRACTOR SAM HEATON PHONE: Business 704 450-1088 Home 878-6772

ADDRESS 110 HAWK ROAD, STATESVILLE, NC 28625

LOCATION I-40W, TL O.M.R., TR LEWIS FERRY RD, TL PINEDELL ACRES DR, TR SEBASTIAN LANE, 5TH \$ 6TH LOTS ON LEFT

SUBDIVISION JEFFERSON LANDING BLOCK / SECTION ____ LOT 5 & 6 LOT AREA 1.163 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 SQ FT/FT²

Septic Tank: 1000 Gallons; STB 928 Date 7-24-00
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: ☐ II ☐ III ☐ IV ☐ V ☐ VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: 50% REDUCTION, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

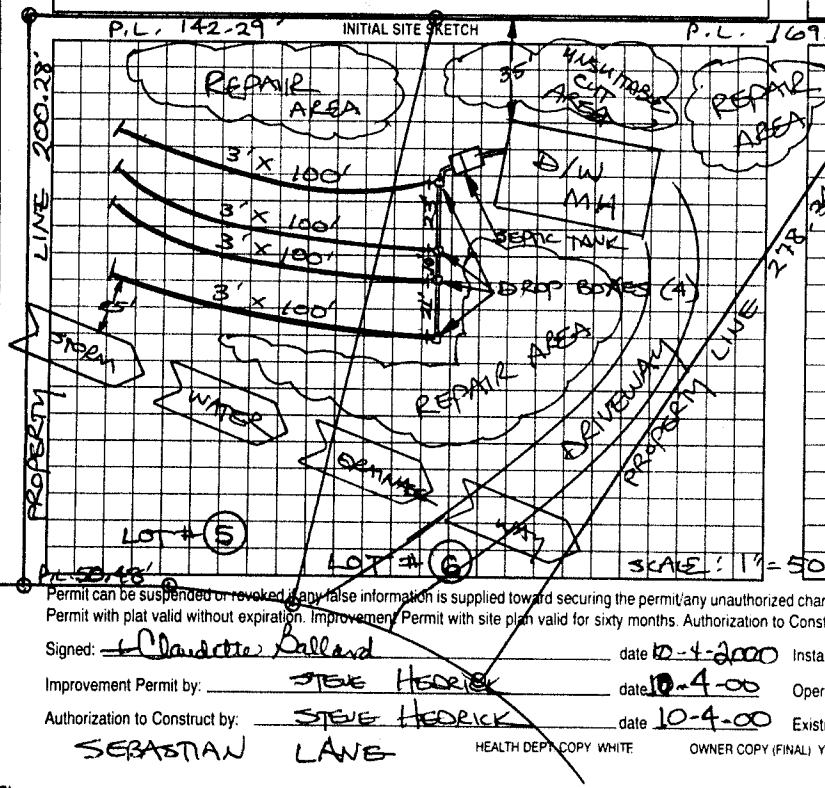
☐ House/Mod Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions:

Comments/Conditions SEPTIC TANK WITH RISERS INSTALLED USING "TUFFITE" FILTER.

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE 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 10-4-2000 Installed by: KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 10-4-00 Operation Permit by: STEVE HEDRICK date 10-16-00

Authorization to Construct by: STEVE HEDRICK date 10-4-00 Existing System Inspection by: ____ date ____

SEBASTIAN LANE

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