IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# Repair PIN# DATE 5-14-99

OWNER OR CONTRACTOR Walter Snook PHONE: Business Home

ADDRESS Pinedell Acres Statesville

LOCATION I-40W TL OMR TR Lewis Ferry TL Pinedell Acres DW on (12) in Culdesac

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS DESIGN FLOW 360 L.T.A.R. .5x

Septic Tank: 1000 Gallons; STB ~~1000~~ 794 Date 2-26-99

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet 225

No Lines 3 Trench Width 36in Max Trench Bottom Depth 36.5 Gravel Depth 18in

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

System Description:

Repair System Description: Gravity Conventional

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

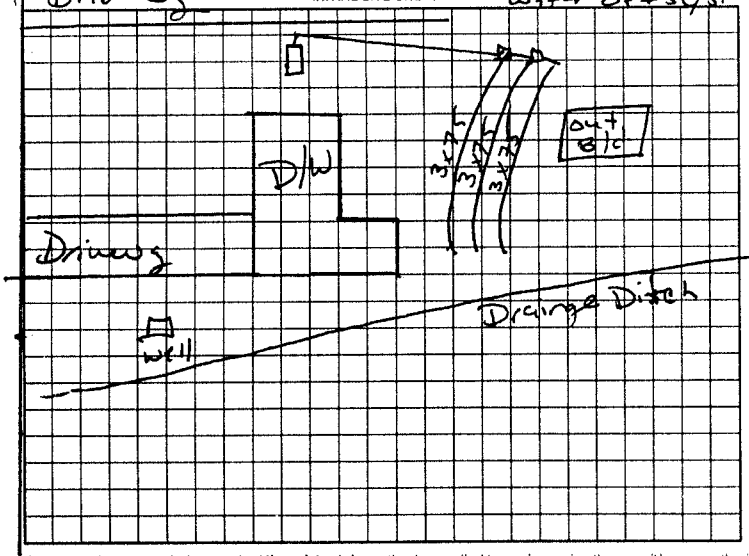
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: ~~Repair~~ Install 3 lines with 18in Stone Need to work with slight dip in yard Old lines run under D/W Trailer Need to fix Drainage Ditch to keep water off system.

Comments/Conditions

INITIAL SITE SKETCH



AS BUILT SKETCH

Same as initial 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: James Hutler date

Improvement Permit by: Mark C Oaks date 5-14-99

Authorization to Construct by: Mark C Oaks date 5-14-99

Installed by: James Hutler

Operation Permit by: R. C. Moore date 5-20-99

Existing System Inspection by: date

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