IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 148880 PIN# 4703-02-2232 DATE 27 MARCH 08

OWNER OR APPLICANT Shane Brown PHONE: Business _____ Home 704-902-7632

ADDRESS 114 Happy Acres Dr. Statesville, N.C.

LOCATION 347 Hickory Hwy Statesville, NC. Across from Homestone Dr.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 0.46ac. SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. 0.3g/FT²/d

Septic Tank: 1000g Gallons: STB 760 Date 1-8-08

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet = 1200 Linear Feet 300'

No Lines _____ Trench Width 36" Max Trench Bottom Depth 18"

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

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons _____

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☑ Public ☐ Community

Gravel Depth _____ ☑ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: * Fill over system 4" with approved fill material. Follow contours

Comments:/Conditions: Polylock filter

INITIAL SITE SKETCH

Please See Attached Layout.

AS BUILT SKETCH

Installed As Drawn

* Storage building addition shall be 5'+ from existing system.

The proposed Building 30'x24' addition does not appear to impact the existing septic system.

**NOTE: Build. Foundation shall be 5'+ ft. From existing system.

R.S.

Date: 23 April 08

ICHD-Environmental Health Division

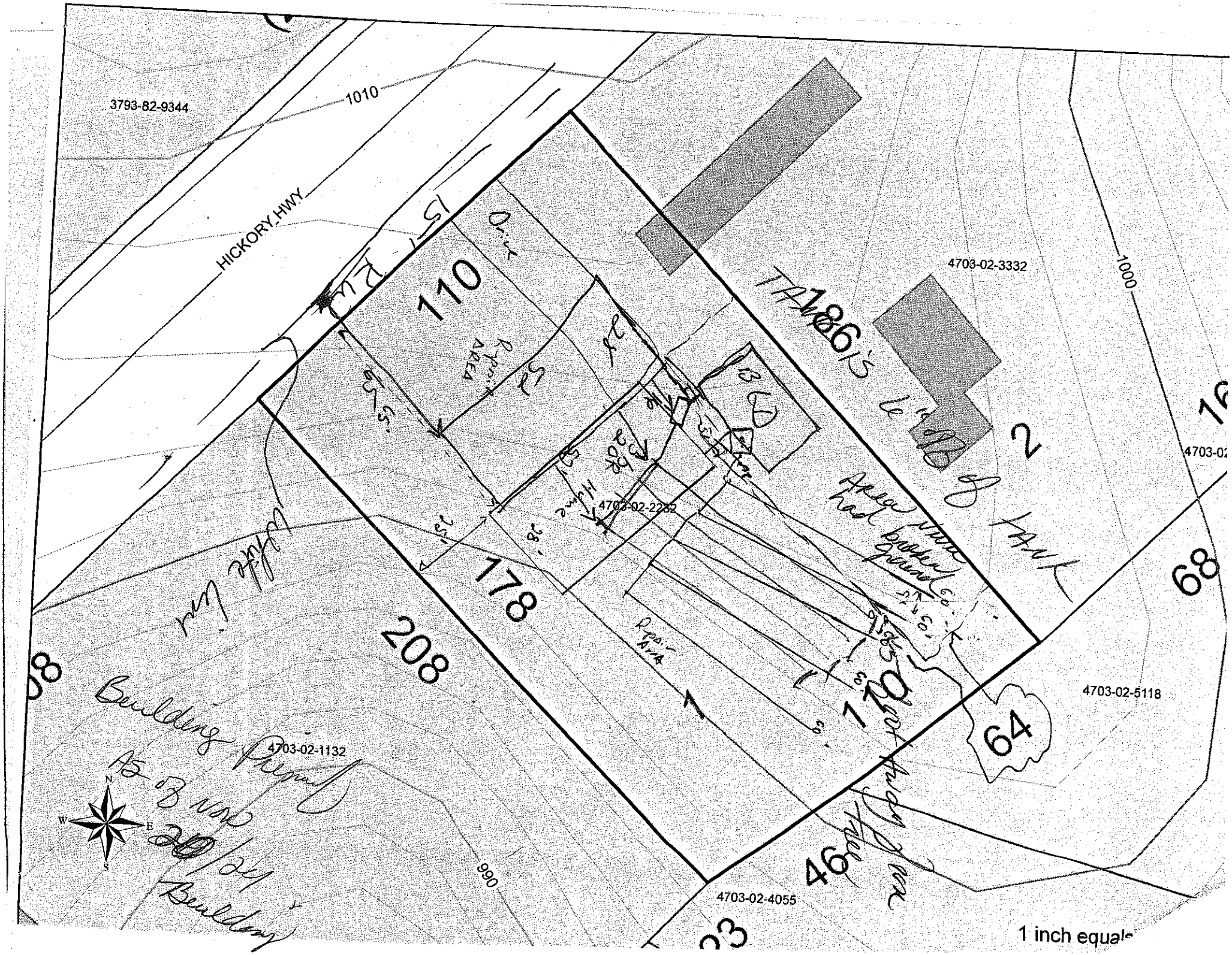
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☑ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: _____ date 3-27-08 Installed by: Tim Ahee

Improvement Permit by: _____, R.S. date 27 March 08 Operation Permit by: _____, R.S. date 24 April 08

Authorization to Construct by: _____, R.S. date 27 March 08 Existing System Inspection by: _____ date _____

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


3793-82-9344
1010
HICKORY HWY
110
Dr.
Pvmt.
Area
178
208
4703-02-2232
4703-02-3332
1000
TAX 186
2
Area not buildable ground
4703-02-5118
64
68
4703-02-1132
Building Physically
Building
990
4703-02-4055
46
1 inch equals