IREDELL COUNTY HEALTH DEPARTMENT

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

CI

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

PERMIT# 105358 PIN# 4703-02-4487 DATE 03-27-02

OWNER OR CONTRACTOR ROGER McCOY PHONE: Business 704-873-2027 Home STEVE COPE - 704-791-5179

ADDRESS 128 DOGWOOD ESTATES CIRCLE STATESVILLE NC 28677

LOCATION 40 W, (L) ON R, (R) HWY 70, ON LFT FIRST LOT PAST WINFOREST DRIVE

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.14 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

EXISTING

Septic Tank: 1000 Gallons; STB _____ Date _____
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 160'
No Lines 2X80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONV GRAV - ADDING LINES
Repair System Description: GRAV PANEL/ 2540 RED
Maintenance Agreement Required: ☐ Yes ☐ No

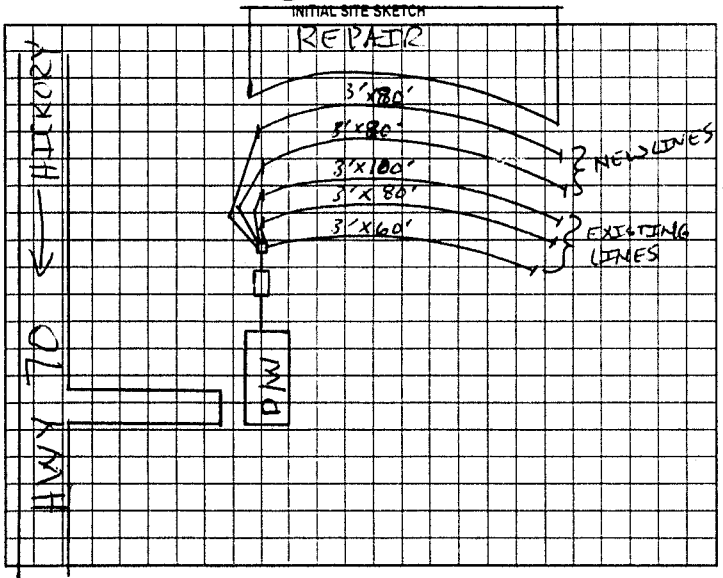
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home DW No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

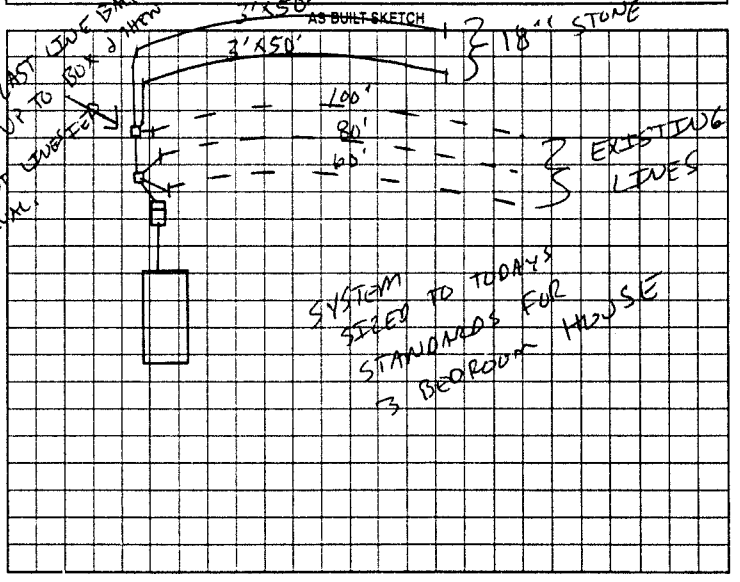
Comments/Conditions: (1) SYSTEM IS BEING UPGRADED TO TODAY'S STANDARDS (2) ADD 2 NEW 80' LINES TO UPGRADE SYSTEM FROM 2 BEDROOM to 3 BEDROOM (3) INSTALL LINES ON CONTOUR (4) CALL TO SET UP APPT TO DISCUSS

Comments/Conditions: HOW TO DIST. EFFLUENT TO EACH LINE PRIOR TO DIGGING (5) THIS PERMIT IS UPGRADING THE 2 BEDROOM SYSTEM TO A 3 BEDROOM SYSTEM.

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: _____ date 3-28-02 Installed by: A-1 BACKHOE

Improvement Permit by: _____ date 03-27-02 Operation Permit by: _____ date 04-04-02

Authorization to Construct by: _____ date 03-27-02 Existing System Inspection by: _____ date _____

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