IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 163181 PIN # 4703-65-9921 DATE 15 September 10

OWNER or APPLICANT Elliott M. ODom Jr. PHONE: Business (704) 724-7909 Home: (704) 380-2875

OWNER or APPLICANT ADDRESS 121 Gypsy Dr. Statesville, N.C. 28677

LOCATION / DIRECTIONS 112 Gypsy Dr. Statesville

SUBDIVISION Hickory Ridge MHP (Travis) BLOCK / SECTION LOT # 3 LOT AREA DESIGN FLOW 360 gpd L.T.A.R. 0.6

Septic Tank Exist. Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 2 Linear Feet 250

Trench Width 3' Max. Trench Bottom Depth Gravel Depth

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

System Description: Conv. Trench

Repair System Description:

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☐ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

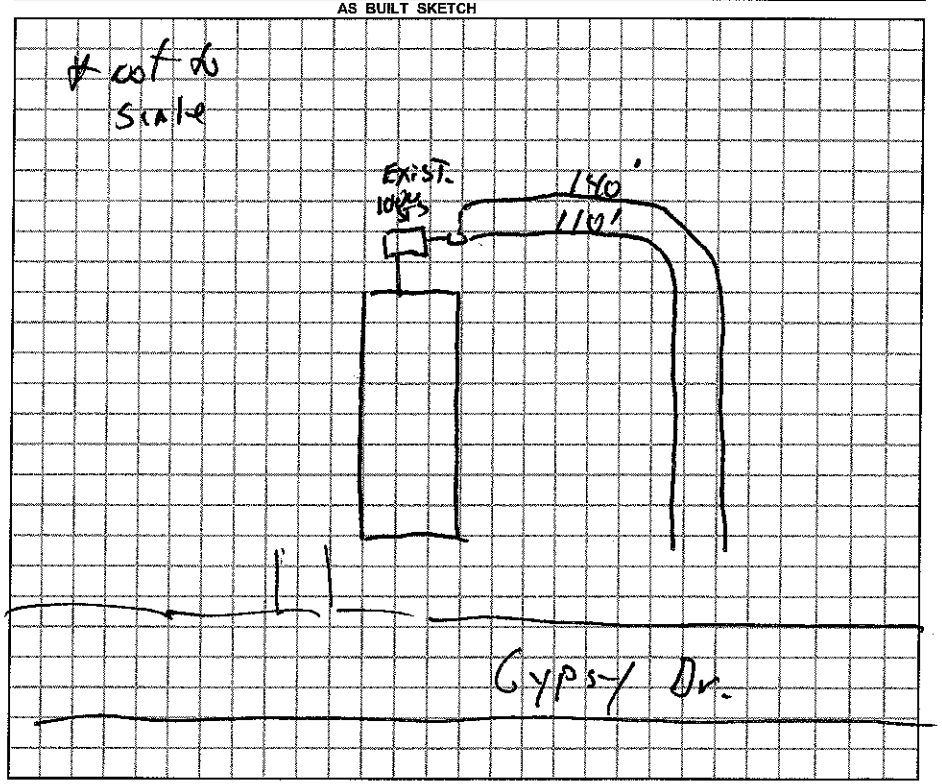
Comments / Conditions

Comments / Conditions

Exist. ing Syst— permit attached

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Date 9/17/10

Improvement Permit by: Date

Authorzation to Construct by: Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by:

Operation Permit by: Date:

Existing System Inspected by: R.S. Date: 15 Sept. 10

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant