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# 4703828272 DATE 10-27-04

OWNER OR CONTRACTOR DENNY HUSKEL PEACOCK PHONE: Business 704-873-8206 Home 704-872-8700

ADDRESS 269 BLACK ROAD, STATESVILLE, NC 28677

LOCATION I-40 W, TL OLD MOUNTAIN ROAD, TR E, LEWIS FERRY ROAD, 1.1 MILE ON RIGHT AT #402

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 0.5 ACRE SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 420 Linear Feet 140

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 18"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees _____

☐ Other _____

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

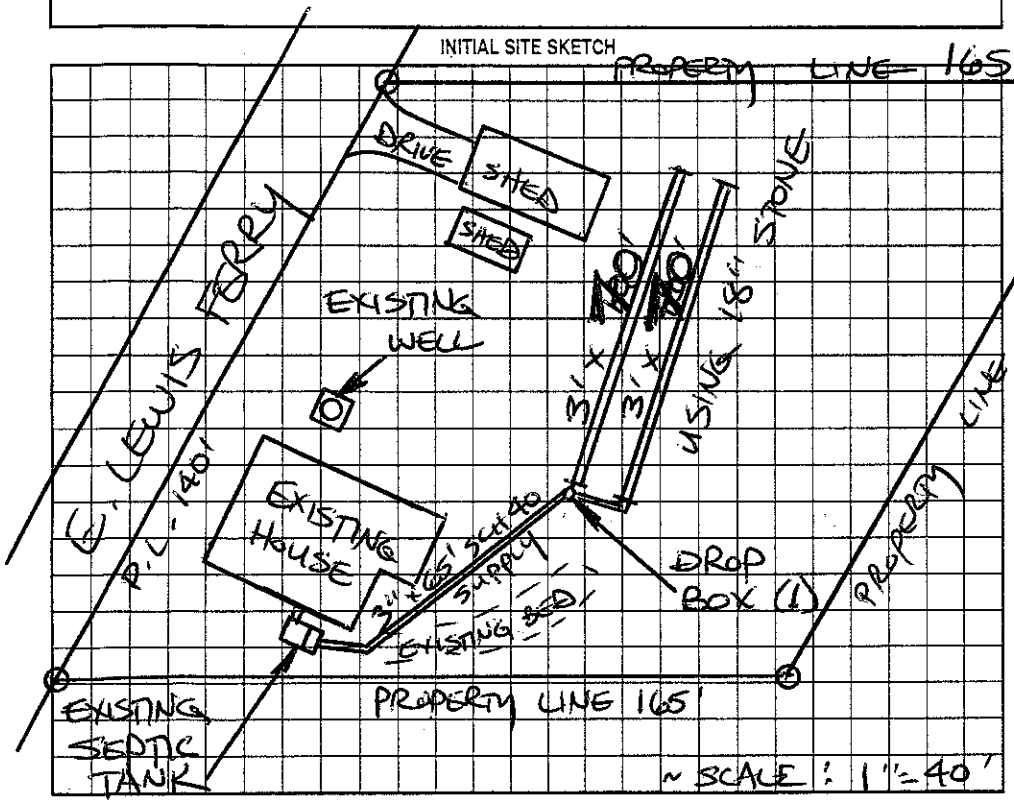
Water Supply: ☑ Individual ☑ Public ☐ Community

WELL

Comments:/Conditions: INSTALL NEW LINES AS FLAGGED USING 18" STONE

Comments:/Conditions: SEPTIC TANK PUMPED & NEW SANITARY TEE INSTALLED

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED 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: Denny & Peacock date 10-27-04 Installed by: JAMES HUSKEY

Improvement Permit by: STEVE HEDRICK date 10-27-04 Operation Permit by: STEVE HEDRICK date 11-2-04

Authorization to Construct by: STEVE HEDRICK date 10-27-04 Existing System Inspection by: _____ date _____

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