1:30

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3825 PERMIT # LLS L10

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

PIN # 4704506725

APPLICANT: Tabitha Benfield APPLICANT ADDRESS: 251 Beulah Rd Statesville NC

SITE ADDRESS: 251 Beulah Rd Statesville NC PHONE: 704-878-6745 ALT. PHONE: N/A

SITE DIRECTIONS: 40 W T/L old Mtn Rd T/R Beulah Rd Lot on right

SUBDIVISION: N/A SECTION: W/A LOT # W/A LOT AREA: 1.32a DESIGN FLOW: Ex L.T.A.R.: Ex

Septic Tank 1000 (gal) STB N60 Date 2/8/17
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 2 Linear Ft: 300
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☐ New System ☑ Repair ☐ Expansion System Type: I II [III] IV V VI
System Description: Tank + 25% reduction
Repair System Description:
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

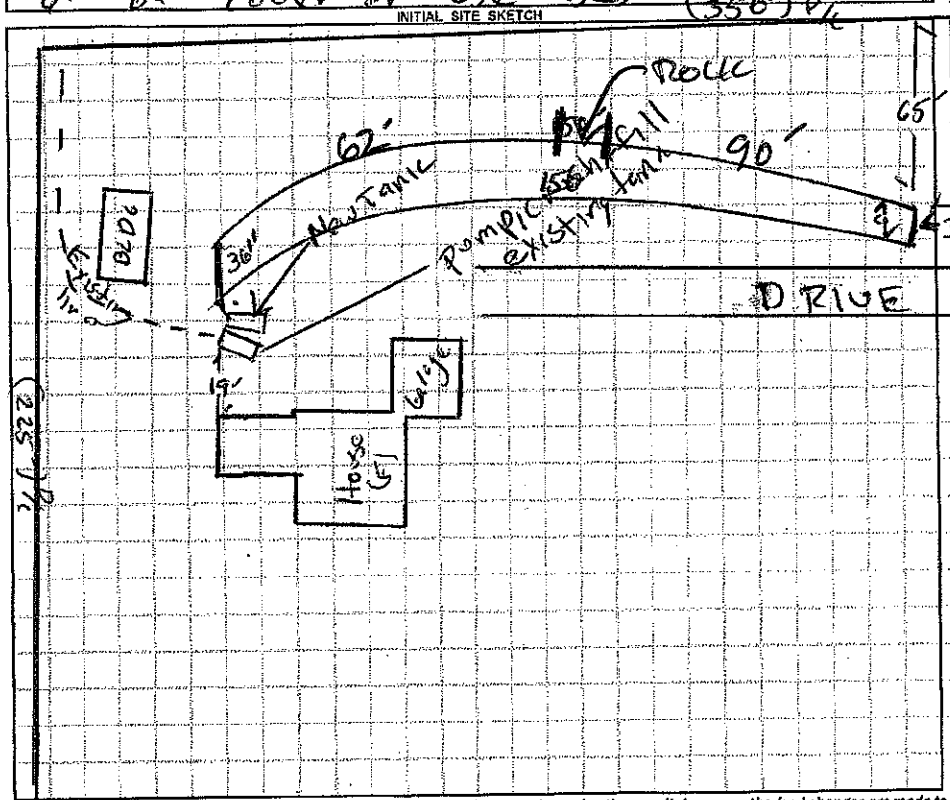
☒ Residence No. Bedrooms Ex
☐ Business No. Persons Ex
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

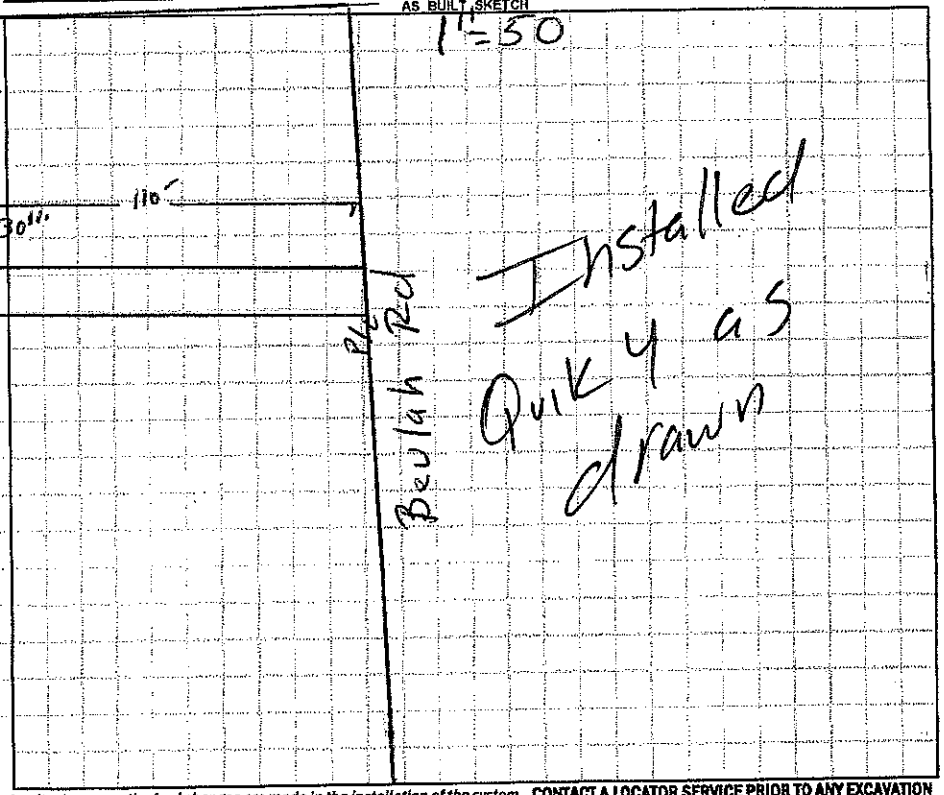
Comments / Conditions: Pump, crush, and fill existing tank. Maintain 5' off any building foundation. Maintain no greater than 6" of cover or use risers. (350') P/L

Install 25% reduction on contour with serial distribution

INITIAL SITE SKETCH



AS BUILT SKETCH 1"=50



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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: Tabitha B. Benfield Date: 3-08-17 Installed by: K + M Grading

IMPROVEMENT PERMIT by: Date: 03/06/17 OPERATION PERMIT by: Date: 04/10/17

AUTHORIZATION TO CONSTRUCT by: Date: 03/06/17 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK