IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 113698 PIN# 4704-71-7085 DATE 7/21/03

OWNER OR CONTRACTOR Scott H. Johnson PHONE: Business (704) 528-1468 Home

ADDRESS 114 Cricket Lane Statesville NC 28677

LOCATION I 40 W Exit mm Rd, (R) Bowles Rd about 1/10th mile on Right

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA .96 Ac. SITE CLASS. P5 DESIGN FLOW 360 L.T.A.R. .30

Septic Tank: 1,000 Gallons; STB 794 Date 9-9-03
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, (II) III, IV, V, VI
System Description: Gravity, Conv.
Repair System Description: Gravity, Conv.
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

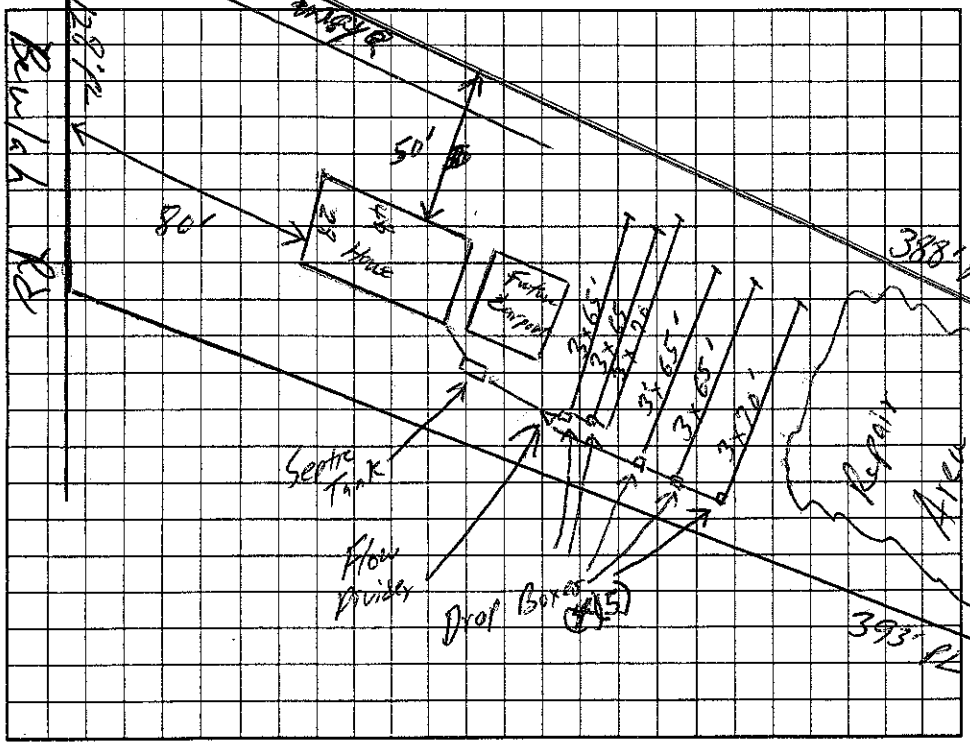
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

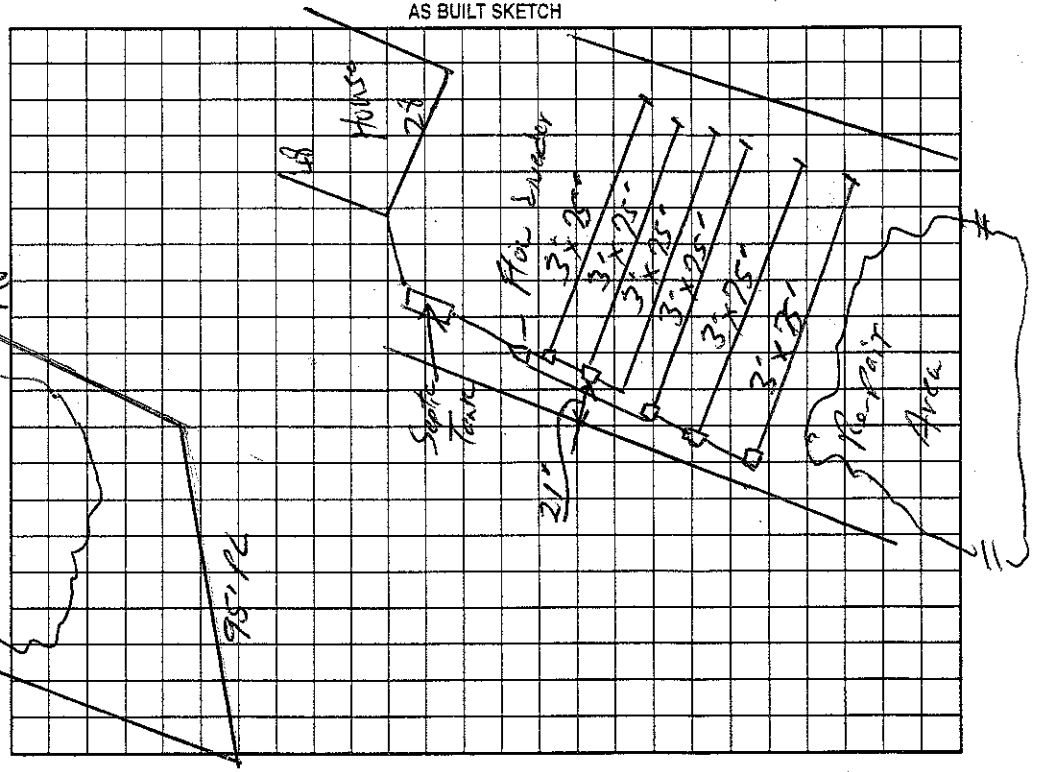
Comments:/Conditions:

Comments:/Conditions: 1st 2 lines okay 10/8/03
- Zabel Filter + S.T. Risers Installed
- 450 Linear Feet Installed @ 75 ft

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: Scott H. Johnson date

Improvement Permit by: William O. Johnson date 7/21/03

Authorization to Construct by: William O. Johnson date 7/21/03

Installed by: Wes Lytton

Operation Permit by: William O. Johnson date 10/14/03

Existing System Inspection by: date

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