IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 069982 PIN# 4706 64 3745 DATE 3-12-98

OWNER OR CONTRACTOR R.W. NICHOLSON PHONE: Business 838-9724 Home 876-4359

ADDRESS 182 MILLSTONE DRIVE, STATESVILLE, NC 28625

LOCATION NC115 N, TL SCOTTS CREEK ROAD, TL LARKIN LANE, TR KANSAS LANE, LOT AT END ON LEFT

SUBDIVISION SCOTTS CREEK EST. BLOCK / SECTION I LOT 33 LOT AREA 1.664 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 4-7-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

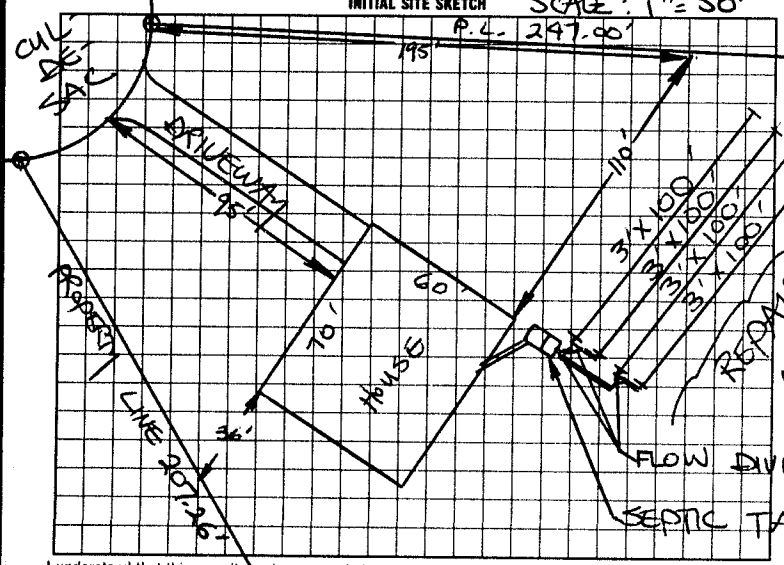
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other

Water Supply: ☐ Individual ☑ Public ☐ Community

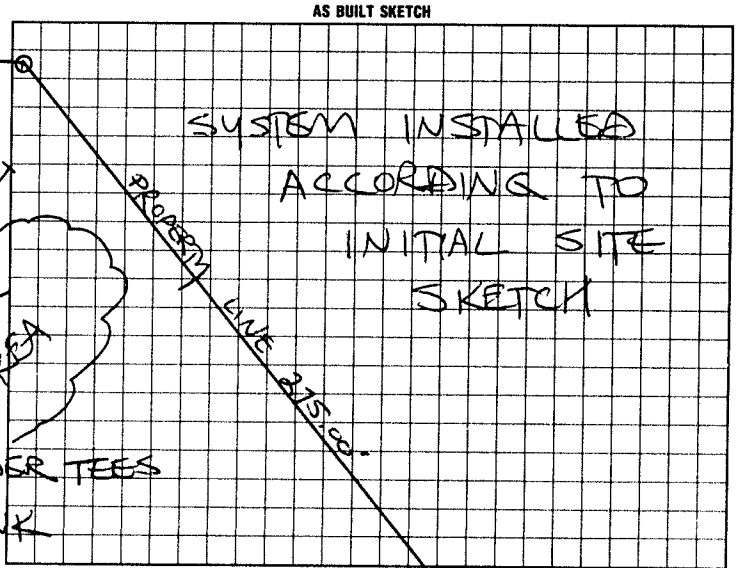
Comments:/Conditions: ① SCOUR TRENCH SIDEWALLS AND APPLY LIME PRIOR TO INSTALLING STONE. ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION.

Comments:/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK" FILTER

INITIAL SITE SKETCH SCALE: 1" = 50'



AS BUILT SKETCH



I understand that this 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 _____ Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 3-12-98 Operation Permit by: STEVE HEDRICK date 5-24-99

Authorization to Construct by: STEVE HEDRICK date 3-12-98 Existing System Inspection by: _____ date _____

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