IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 4-27-94

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

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

PERMIT# ~~[illegible]~~ 081613 PIN# 4706 93 6736 DATE 6-26-99

OWNER OR CONTRACTOR GREGORY ATCHLEY PHONE: Business 1-800-412-5096 Home 871-0844

ADDRESS P.O. BOX 16285 STATESVILLE NC 28687

LOCATION NC 90 W, TR SCOTTS CREEK RD, TR DELLA LANE, LOT AT END ON LEFT

SUBDIVISION LARKIN SLOAN BLOCK / SECTION II LOT 18 LOT AREA 4.731 ACRES SITE CLASS. IPS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 3-12-03

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 3

☐ Business No. Employees _____

☐ Other _____

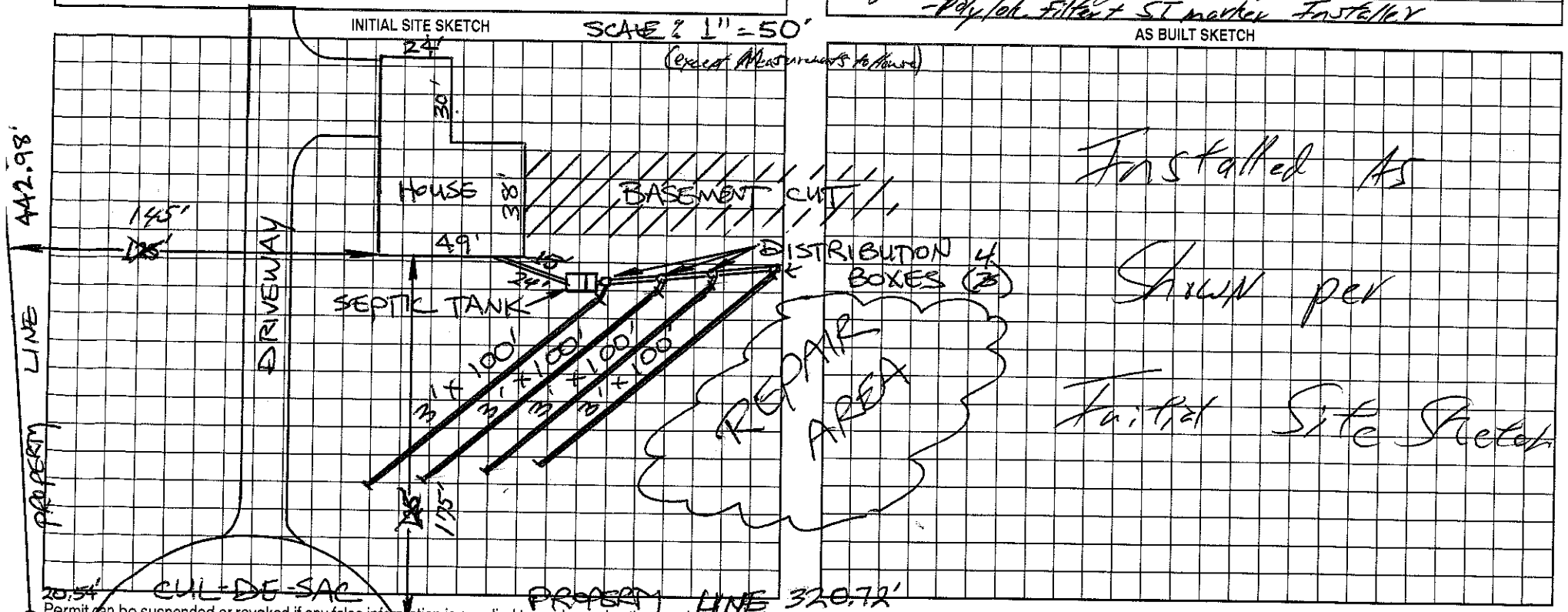
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: KEEP SYSTEM MINIMUM 15' FROM BASEMENT FOUNDATION DRAIN AND FROM BASEMENT CUT.

Comments/Conditions: 9/17 - visited site moves House to 145' + 175' off property Lines. Everything okay with septic design as drawn. W. Johnson

-Poly/ok Filter + ST marker Fosteller

INITIAL SITE SKETCH SCALE: 1" = 50' (Except Measurements As Noted)



AS BUILT SKETCH

Installed As Shown per Initial 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: _____ date 7-9-99 Installed by: Tommy Cothren

Improvement Permit by: STEVE HEDRICK date 6-26-99 Operation Permit by: _____ date 5/3/03

Authorization to Construct by: STEVE HEDRICK date 6-26-99 Existing System Inspection by: _____ date _____

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