IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 22692 DATE 3-29-96 TAX MAP NO. 9F-2-B-12 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR WILLIAM T. MARLOW PHONE: Business 881-4506 Home 872-6375/878-0110

ADDRESS 228 OAK HAVEN DR STATESVILLE, NC 28677

LOCATION NC 115N, TL SCOTTS CREEK RD, TR EMMA LANE, 2ND LOT ON RIGHT

SUBDIVISION STERLING OAKS BLOCK / SECTION LOT 12 LOT AREA 6.28 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank 1000 Gallons; STB 1007 Date 2-27-97

Pump Tank Gallons; PT Date

Pump Make Model Serial No

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 18-36" Gravel Depth 12"

☑ New System Repair System Type: I II III IV V VI

System Description CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAV/PUMP

Maintenance Agreement Required Yes No

☑ House/Mod. Home No Bedrooms 3

Mobile Home No Bathrooms 2

Business No Employees

Other

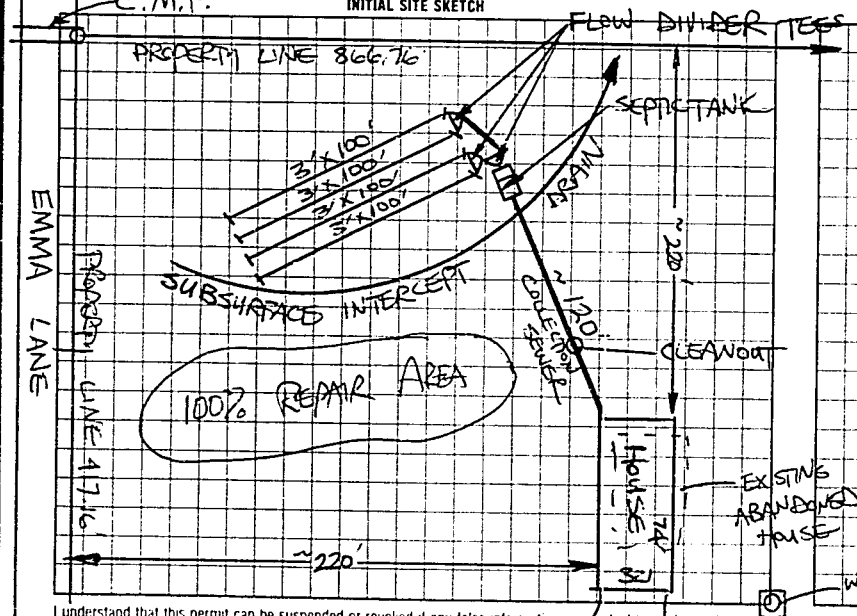
Slab Crawl Space ☑ Basement w/plumbing Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments ① INSTALL SUBSURFACE INTERCEPT DRAIN AS SHOWN BEGINNING 36" DEEP TO DAYLIGHT ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR 100' LINES.

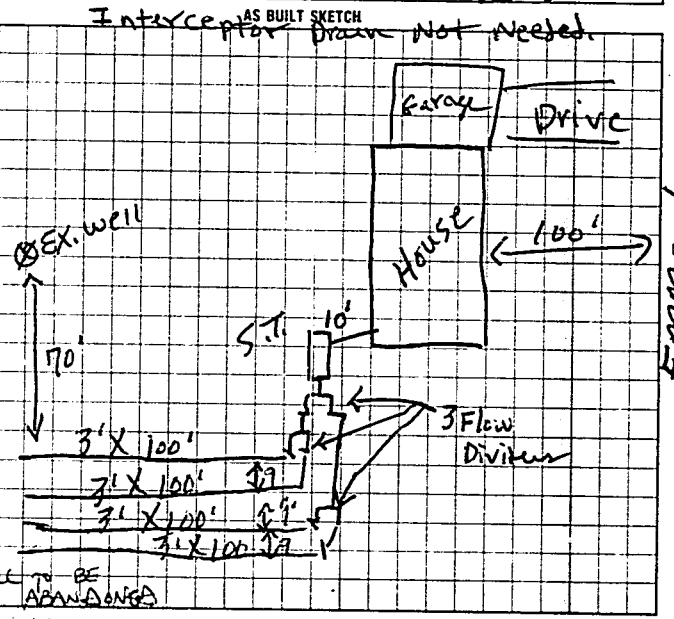
Comments House + System placed higher up Slope + closer to Road

INITIAL SITE SKETCH



AS BUILT SKETCH

Interceptor Drain Not Needed.



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.

Authorization to Construct is valid five (5) years from date of issuance. Improvement Permit has no expiration date.

Signed [signature]

Improvement Permit by STEVE HEDRICK date 3-29-96

Entire System Inspection by STEVE HEDRICK date 3-29-96

AUTHORIZATION TO CONSTRUCT:

Installed by Kenny Pearson

Certificate of Completion by date

Operation Permit by [signature] date 4-9-97

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