IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 8-3-99

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

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

PERMIT# 083127 PIN# 4709 39 6502 (PART) DATE 12-3-99

OWNER OR CONTRACTOR HENRY C. COOK PHONE: Business 872-6991 Home 872-2206

ADDRESS 151 ROSEBUD LANE, STATESVILLE, NC 28677

LOCATION NC 115 N, TL PISGAH ROAD, TR JOHNSON FARM ROAD, ON LEFT PAST 3RD HOUSE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.50 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GAD/PPD

Septic Tank: 1000 Gallons: STB 312 Date 9-12-99

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533

No Lines EIGHT 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 w/o plumbing

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

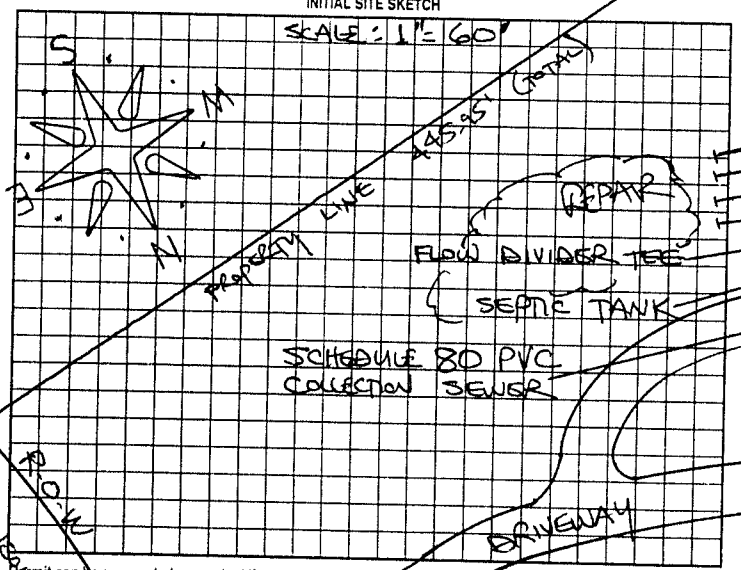
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

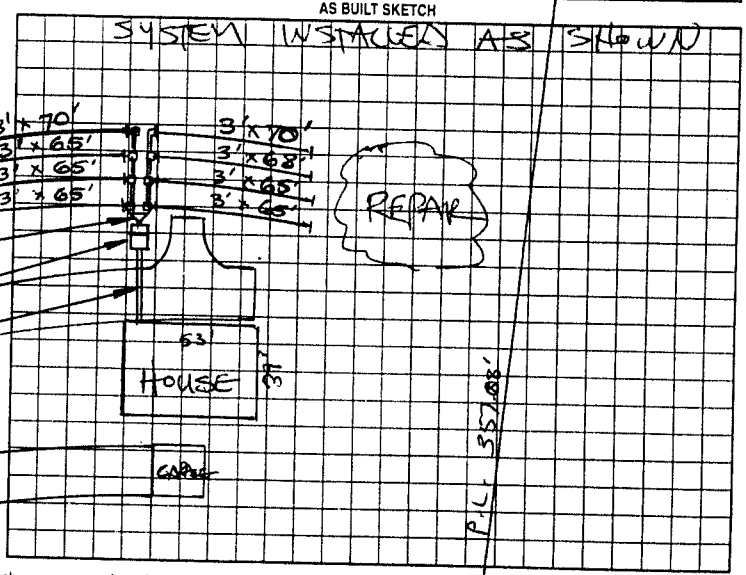
Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: P.C. 214.26' SEPTIC TANK W/ FILTERS INSTALLED USING "POLYLOK" FILTER

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: x Henry C. Cook date 12-3-99 Installed by: MARK WINGLER

Improvement Permit by: STEVE HEDRICK date 12-3-99 Operation Permit by: STEVE HEDRICK date 12-29-99

Authorization to Construct by: STEVE HEDRICK date 12-3-99 Existing System Inspection by: _____ date _____

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