IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 177679

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

PIN # 4711150739

APPLICANT: Keith Levan APPLICANT ADDRESS: 212 Canal Drive

SITE ADDRESS: 2508 Buffalo Shoals Rd. PHONE: 704-528-0598 ALT. PHONE: N/A

SITE DIRECTIONS: Buffalo Shoals Rd S. Site on R after Grayrock Dr.

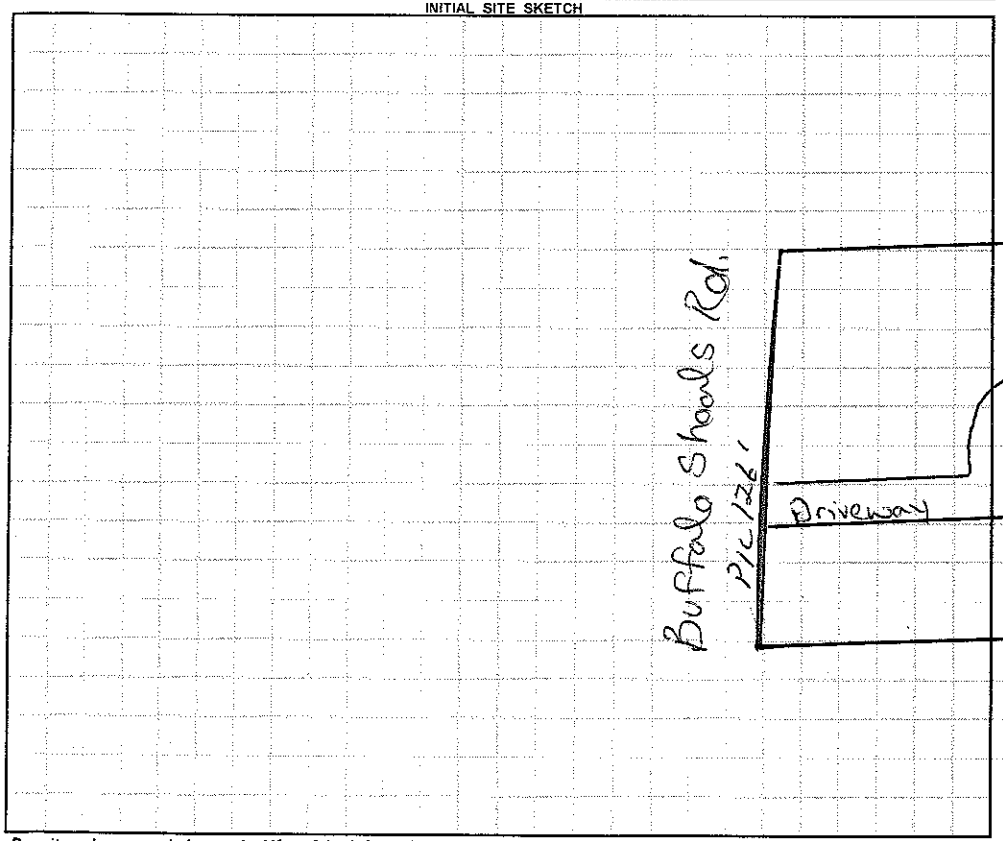
SUBDIVISION: Gray Rock Shoals SECTION: N/A LOT # 45 LOT AREA: 1.09 acres DESIGN FLOW: 360 gpd L.T.A.R.: Existing

Septic Tank: Existing (gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion System Type: I ☑ II III IV V VI	☑ Residence	No. Bedrooms: 3	Water Supply: ☑ Private
Pump Tank (gal)	PT	Date	System Description: Conventional	☐ Business	No. Persons	☐ Public
Pump Make	Model	Serial #	Repair System Description: Conventional	☐ Other	No. Employees	☐ Community
# Nitrification Fields: 6x	# Lines: 6x	Linear Ft: 6x.	Maintenance Agreement Required: ☐ YES ☑ NO	☐ Slab	☐ Crawl Space	
Trench Width: 6x	Max. Trench Bottom Depth: 6x	Gravel Depth: 6x	☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing		☑ Basement w/o plumbing

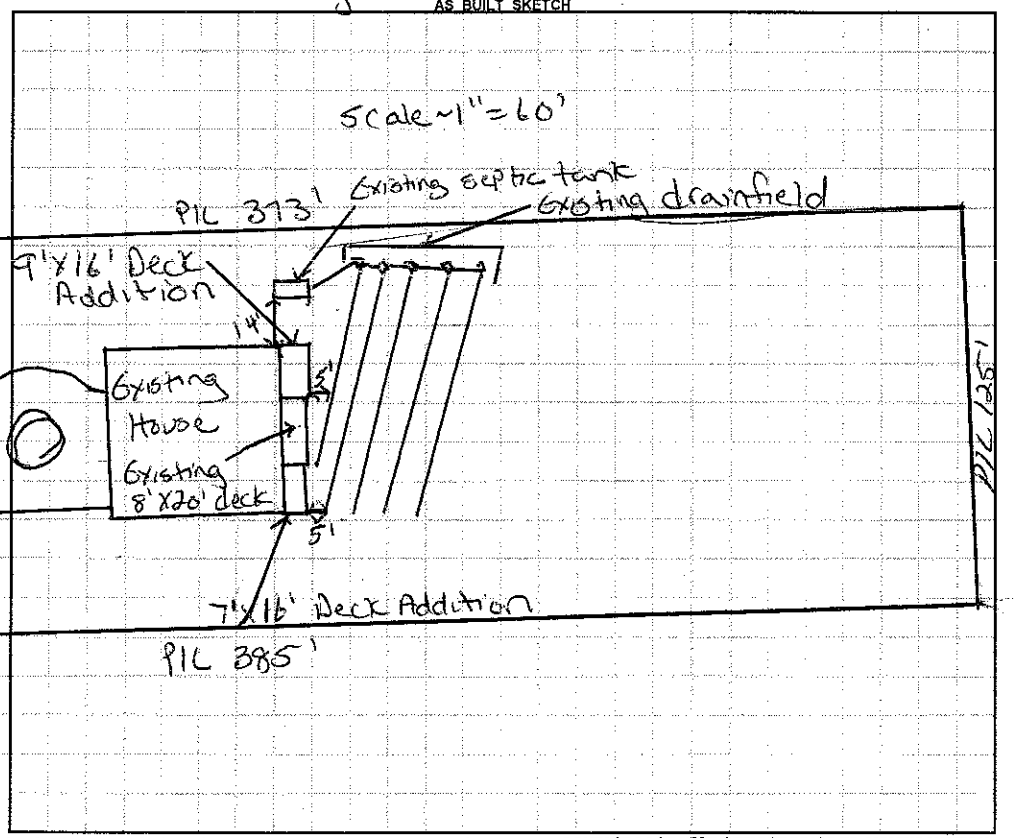
Comments / Conditions:

- Maintain a minimum of 5' between all components of septic tank system and any new deck supports that go to the ground. Existing deck supports are 2' from existing drainfield.

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Keith Levan Date: 5/6/2013 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Justin Henderson Date: 5-7-13

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK