H5 [redacted]

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 — Mooresville Office (704) 660-3625 — PERMIT # 223355

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

PIN # 4711-92-6308

APPLICANT: Lloyd D. Sain — APPLICANT ADDRESS: 430 Pineville Rd. Statesville, NC

SITE ADDRESS: 430 Pineville Rd. Statesville, NC — PHONE: 704-528-5439 — ALT. PHONE: 704-397-7118

SITE DIRECTIONS: Buffalo Shoals Rd W towards Lake Norman → L on Pineville Rd → House is on Right

SUBDIVISION: — — SECTION: — LOT # — LOT AREA: 7.00 acres — DESIGN FLOW: 240 GPD L.T.A.R.: 0.275

Septic Tank 1000 (gal) — STB Ex Infiltrator — Date Ex IM-1060
Pump Tank — (gal) — PT — — Date —
Pump Make — — Model — — Serial # —
Nitrification Fields 1 — # Lines 4 — Linear Ft: 218
Trench Width 36" — Max. Trench Bottom Depth 36" — Gravel Depth —

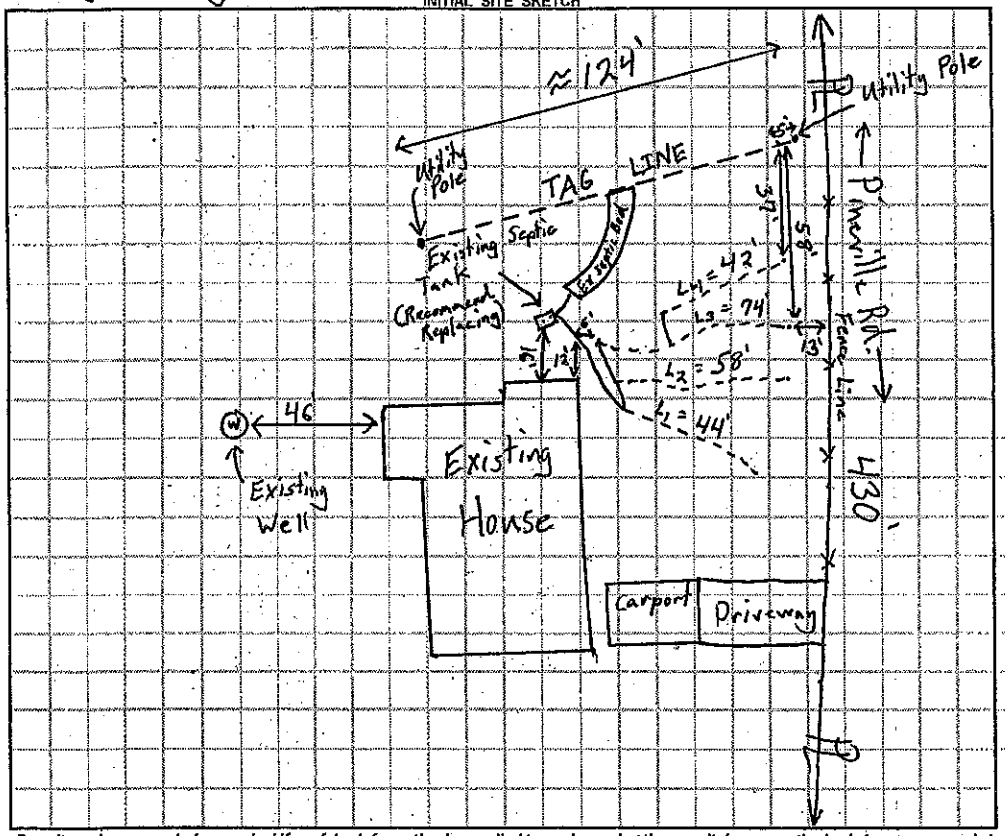
☐ New System ☒ Repair ☐ Expansion — System Type: I II (III) IV V VI
System Description: —
Repair System Description: Replace drainfield as requested 25% Reduction
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing
No. Bedrooms 2 — No. Persons 4 — No. Employees — — ☒ Crawl Space
☐ Basement w/o plumbing

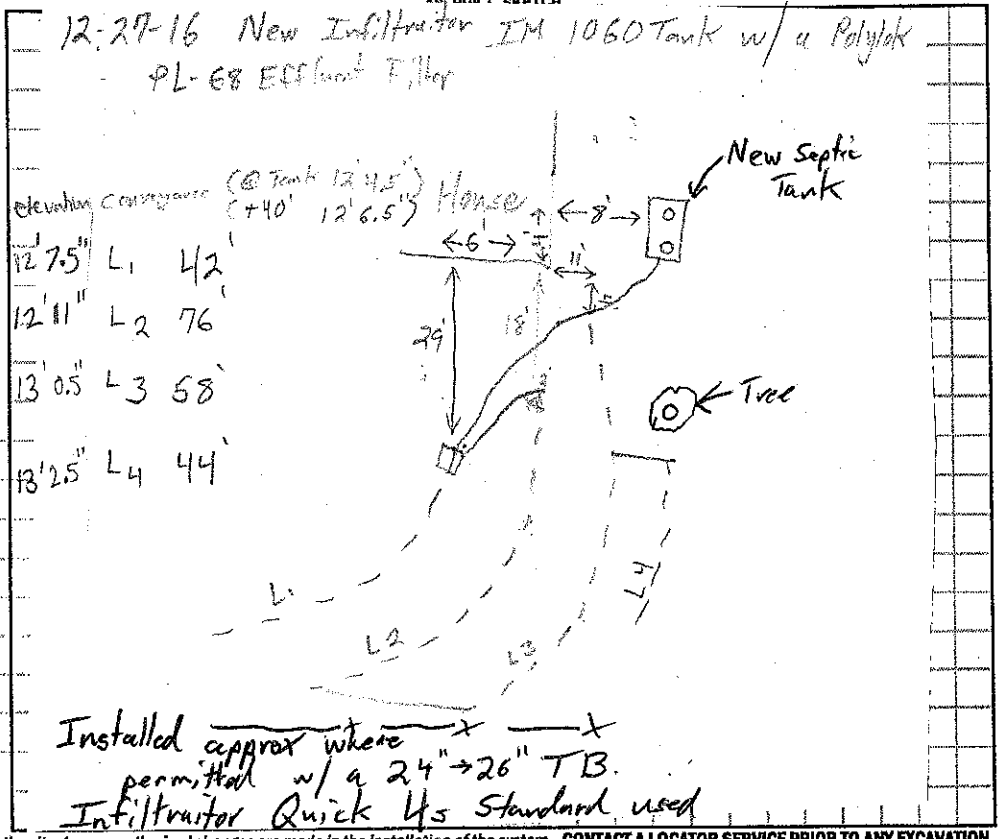
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Follow all N.C. septic rules. Recommend pumping + replacing existing septic tank w/ new 1000-gallon septic tank as well. Recommend pumping septic tank every 3-5 years.

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: — Date: — Installed by: Tommy Frye

IMPROVEMENT PERMIT by: Tom Shuck — Date: 12/12/16 — OPERATION PERMIT by: Tom Shuck — Date: 12-27-16

AUTHORIZATION TO CONSTRUCT by: Tom Shuck — Date: 12/12/16 — Existing System Inspected by: — Date: —

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