IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

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

PERMIT # 218450

PIN # 4711-98-6279

APPLICANT: Daniel Ford

APPLICANT ADDRESS: 7537 Chasewater Dr. Statesville, NC 28625

SITE ADDRESS: 128 Aubry Dr. Statesville, NC

PHONE: 704-608-6376 ALT. PHONE:

SITE DIRECTIONS: Buffalo Shoals Rd S from Statesville → L on Eufola Rd → R on Amber Lane → L on Aubry Drive → Lot on Right

SUBDIVISION: Anthony Day Estates SECTION: LOT # 6 LOT AREA: 0.502 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.30

Septic Tank	1000 (gal)	STB	760	Date	11-7-16
Pump Tank	— (gal)	PT	—	Date	—
Pump Make	—	Model	—	Serial #	—
# Nitrification Fields	1	# Lines	5	Linear Ft:	300
Trench Width	36"	Max. Trench Bottom Depth	34" [Lowside]	Gravel Depth	—

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: 25% Reduction - Serial Distribution

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 3 No. Persons 6 No. Employees — ☒ Crawl Space

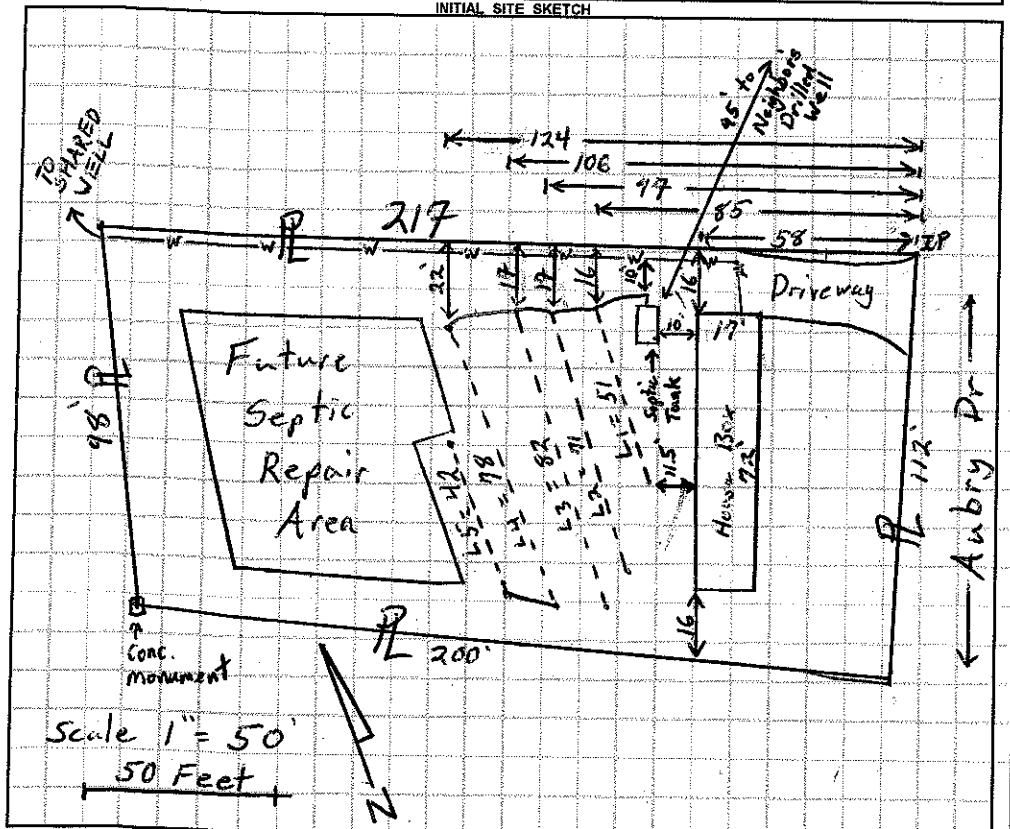
Water Supply: ☒ Private Shared ☐ Public ☐ Community

☐ Basement w/o plumbing

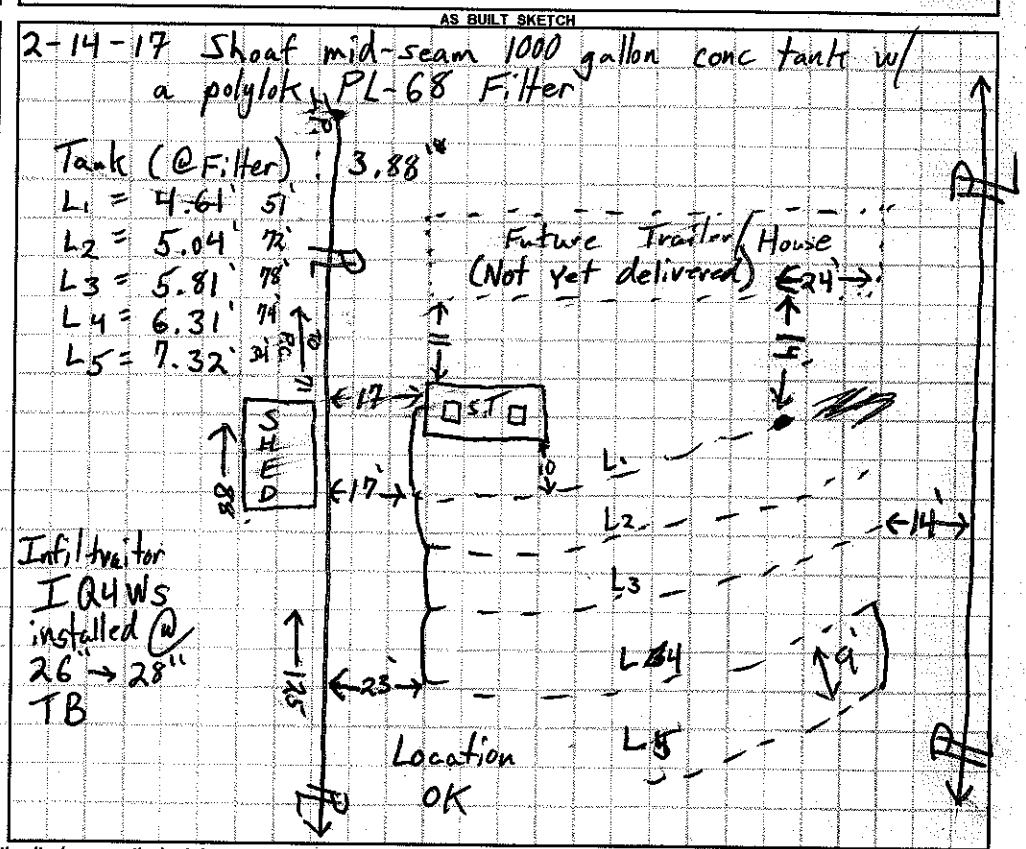
Comments / Conditions: Follow all N.C. septic rules. Recommend pumping septic tank every 3-5 years. Septic components MUST maintain a minimum of 10-foot setback from future water line.

* Though 324 l.f. of drainfield has been laid out, only 300 l.f. is required to be installed.

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: [signature] Date: 10/6/16 Installed by: Sherman Dunn #2702

IMPROVEMENT PERMIT by: Tom Shuck Date: 9-28-16 OPERATION PERMIT by: Tom Shuck Date: 2-14-17

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 10-6-2016 Existing System Inspected by: Date:

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