IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 11407 4 PIN# 4712-59-4698 DATE 7/28/03

OWNER OR CONTRACTOR Edwin Dana Lytton PHONE: Business — Home (704) 872-0333

ADDRESS 261 Black Rd Statesville N.C. 28677

LOCATION (1) 26 mtn Rd, (R) Cekote Eufola (L) Black Road last lot on the left

SUBDIVISION — BLOCK / SECTION ____ LOT ____ LOT AREA 5.86 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .35

Septic Tank: 1,000 Gallons: STB 794 Date 9-22-01
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1371 Linear Feet 345
No Lines 5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

☒ New System ☐ Repair System Type: I II III IV V VI
System Description: Conventional, 25% Redu.
Repair System Description: Pump, 50% Reduc
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

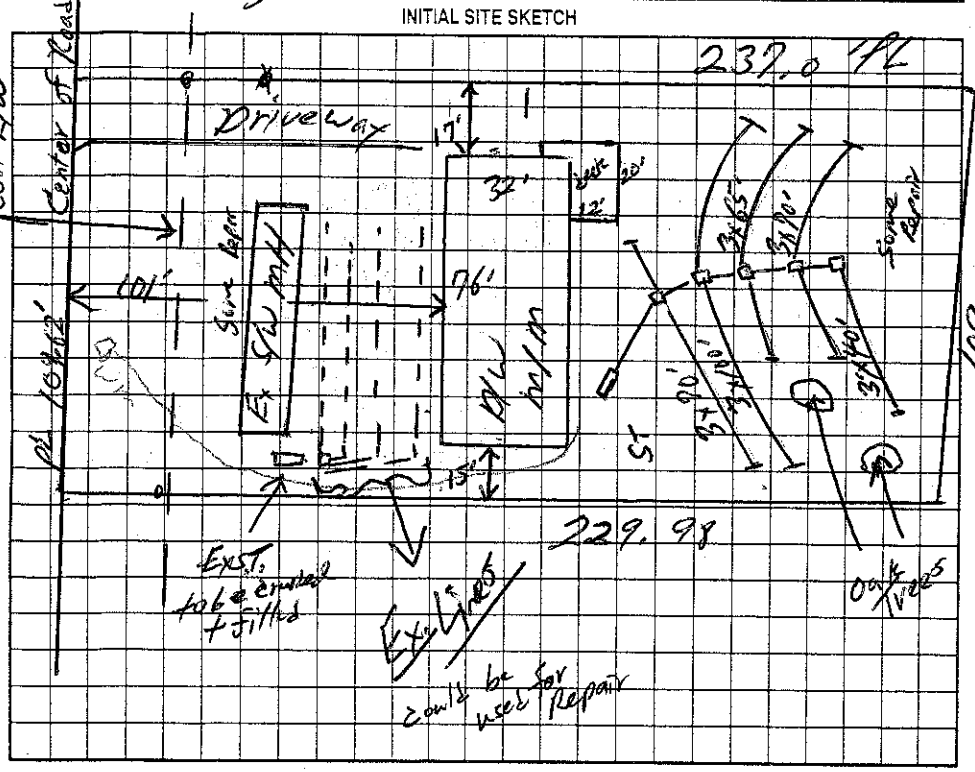
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

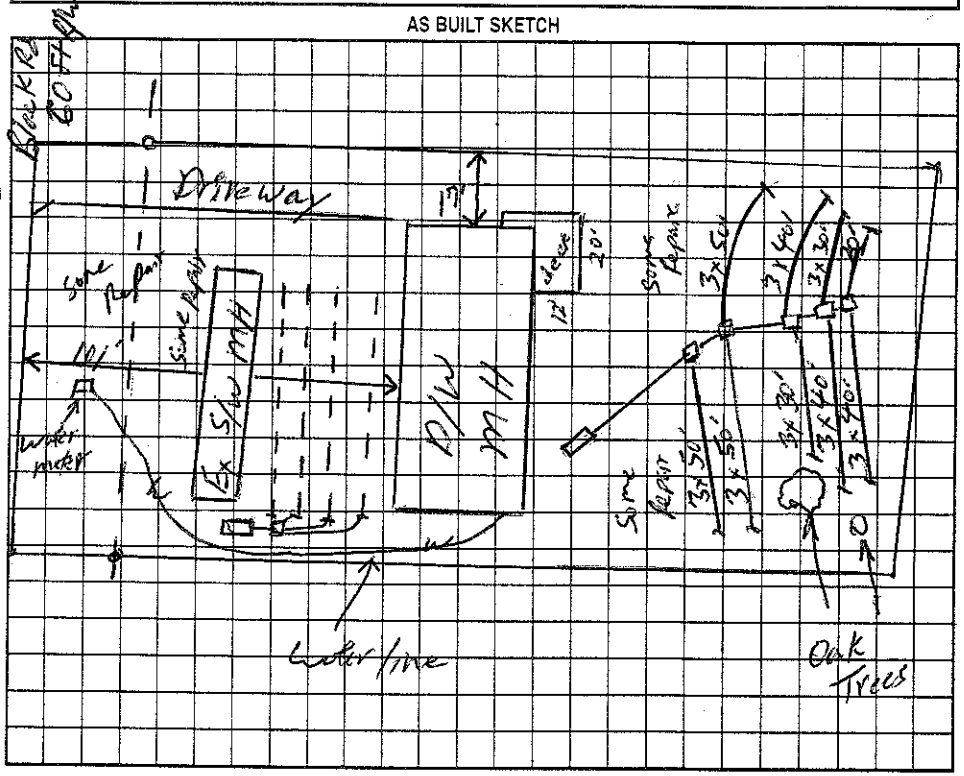
Comments:/Conditions: (1) Crush + Fill existing Septic tank (2) Maintain proper set backs (3) Ex. S/W MH must be removed before Operation Permit issued. (4) Ex System can be used for repair area if not damaged

Comments:/Conditions: - Zabel Filter Installed. ST Risers Installed on tank. Ez Flow Installed. - Crush + Filled S.T. 1-21-04 wd

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: Pam Ballicher date 7-29-03

Improvement Permit by: William O. Johnson date 7/28/03

Authorization to Construct by: William O. Johnson date 7/28/03

Installed by: Bob Herman / Bob's Backhoe Service (11/13/03)

Operation Permit by: William O. Johnson date 1/21/04

Existing System Inspection by: ____ date ____

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