IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 1586776 / 1586777 PIN # 4713086124 (A-B) DATE 11-2-09

OWNER or APPLICANT Price Building and Dev. PHONE: Business Home: 704-878-0330

OWNER or APPLICANT ADDRESS 239 Lewis Ferry RD Statesville 28627

LOCATION / DIRECTIONS Old Mountain RD → 70 West 1st Drive on right

SUBDIVISION BLOCK / SECTION LOT # 1 LOT AREA .18 DESIGN FLOW 600 L.T.A.R. .25

Septic Tank (2) 1000 Gallons: STB (1) 1012 (2) 1012 Date (1) 7/12/2938

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 2 No Lines 9 Linear Feet 360 & 240

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth NA

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

System Description: 25% Gravity

Repair System Description: 50% Low Pressure

Maintenance Agreement Required ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 5

☐ Business No. Persons

☑ Other (Specify) No. Employees

☑ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions

INITIAL SITE SKETCH

AS-BUILT SKETCH

Comments / Conditions

* Must be 36" Trench Bottom
* End Cap distribution
* Install on contour
* Maintain all setbacks
* Septic line must be 10' off waterline

1" = 50'

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 w / plat valid without expiration. ☑ IMPROVEMENT PERMIT w / 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 11-3-09

Improvement Permit by: Date 11-2-09

Authorization to Construct by: Date 11-2-09

Installed by: Gurley Gracin

Operation Permit by: Date: 5-14-10

Existing System Inspected by: Date:

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant