IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (T) MOORESVILLE 704-664-5281

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

PERMIT# 127578 PIN# 4713-71-8567 DATE 6-30-05

OWNER OR CONTRACTOR GREG DULL BLDRS PHONE: Business 704-902-5177 Home 704-873-6471

ADDRESS 158 CANOPY OAK STATESVILLE, NC 28625

LOCATION 40 WEST (D) ONE (R) PLEASANT OR (R) AT LOT #24

SUBDIVISION WARREN ESTATES BLOCK / SECTION ____ LOT 24 LOT AREA .866 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 6-30-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EO=1200' Linear Feet 300'
No Lines 3x100' Trench Width 36" Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I (II) III IV, V, VI
System Description: 60% 25% REDUCT
Repair System Description: [redacted] LP 50% REDUCT
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

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

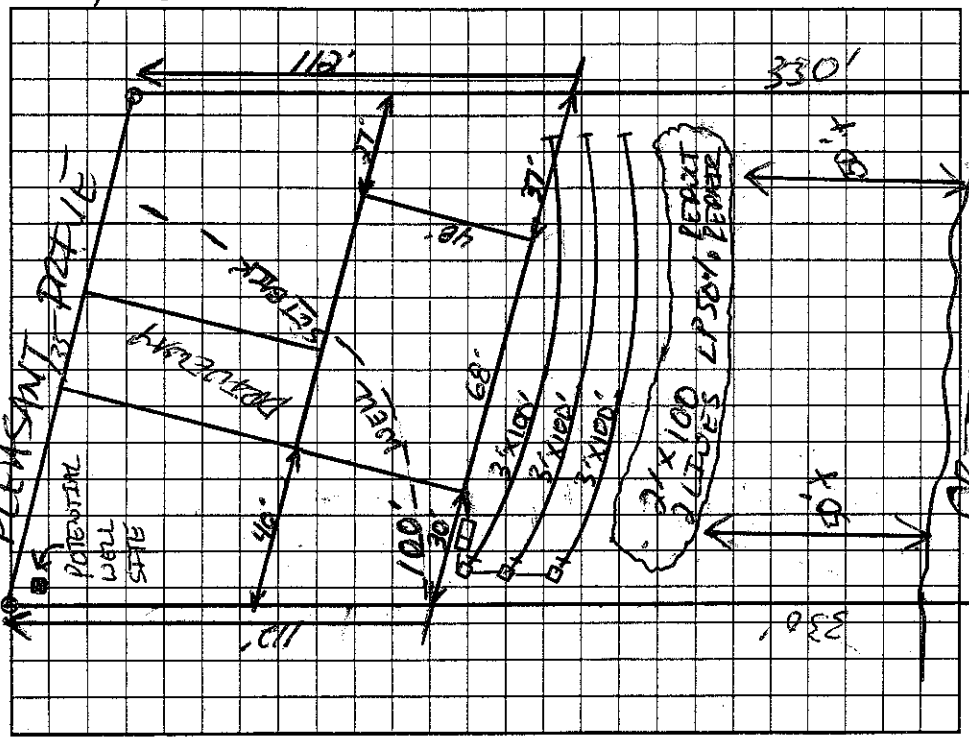
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: (1) NO RECORDS FOUND IN FILES ON NEIGHBORING LOTS 23 + 25. GREG DULL & I CALLED DAVID MOOSE OWNER OF LOTS 22 & 23 SEVERAL TIMES WITH NO ANSWER. (2) INSTALL LINES ON CONTOUR AS FLAGGED AND

Comments/Conditions: AT A MINIMUM TRENCH BOTTOM DEPTH OF 36"! (3) WELL MUST BE 100' FROM SYSTEM DO TO SAPROLITE RULE.

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

Yellow Jeff - Septic tank installed
Septic tank pump installed

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: ____ date 6-24-05 Installed by: Steve Jordan

Improvement Permit by: ____ date 6-30-05 Operation Permit by: ____ date 10-26-05

Authorization to Construct by: ____ date 6-30-05 Existing System Inspection by: ____ date ____

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