IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# Repair PIN#

OWNER OR CONTRACTOR Julie Babb PHONE: Business Home DATE 4-15-99

ADDRESS 345 Gilbert Rd Statesville

LOCATION I-40 W TL Stamey Farm TL Gilbert House on (R) across from church

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS P/S DESIGN FLOW 360 L.T.A.R. Existing

Septic Tank: 1000 Existing Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3 Trench Width 36in Max Trench Bottom Depth 36in Gravel Depth 12in

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

System Description:

Repair System Description: Gravity Conversion

Maintenance Agreement Required: ☐ Yes ☐ No

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

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

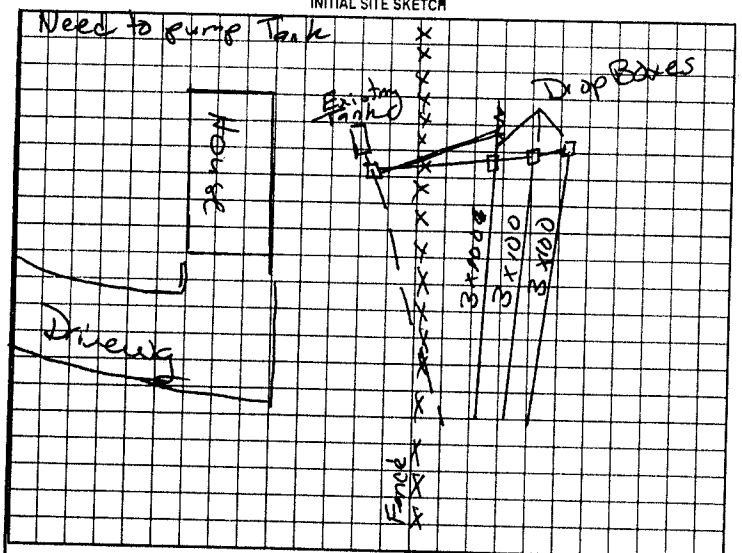
☐ Other

Water Supply: ☐ Individual ☑ Public ☐ Community

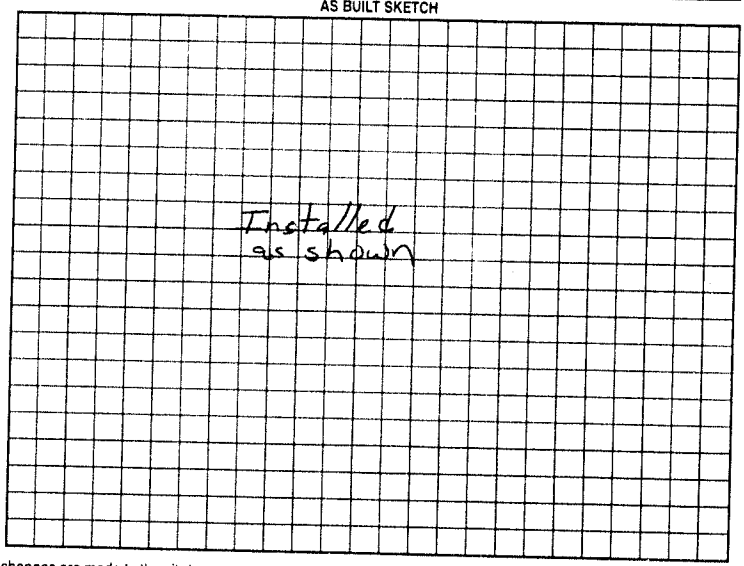
Comments/Conditions: This permit serves as 'Notice of Violation' Install 3 lines 9ft on center - Need to keep cows off system. Need to Fix all water leaks Need to check sanitary T replace if needed

Comments/Conditions

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: Julie Babb date

Improvement Permit by: Mary Coff RS date 4-15-99

Authorization to Construct by: Mary Coff RS date 4-15-99

Installed by: James Hudler

Operation Permit by: Mary Coff RS date 6-2-99

Existing System Inspection by: date

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