IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 219723

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

PIN # 4715-85-7325.000

APPLICANT: Kenneth Watt APPLICANT ADDRESS: 129 Beckam Rd. Sve. NC

SITE ADDRESS: 131 Castle Pines Ln. Statesville NC PHONE: 704-902-4495 ALT. PHONE:

SITE DIRECTIONS: Hwy 90 W, R Taylorsville Hwy, R Agosta Farms, L Stackhouse, L Castle Pines Dr.

SUBDIVISION: Castle Gate SECTION: — LOT # 84 LOT AREA: 0.52 Acre DESIGN FLOW: 360 GPD L.T.A.R.: -3

Septic Tank 1000 (gal) STB 1012 Date 9-12-16

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 @ 75' Linear Ft: 300'

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

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

System Description: 25% REDUCTION - GRAVITY

Repair System Description: 25% REDUCTION - GRAVITY

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

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

No. Bedrooms 3 No. Persons 6 No. Employees — ☒ Crawl Space ☐ Basement w/o plumbing

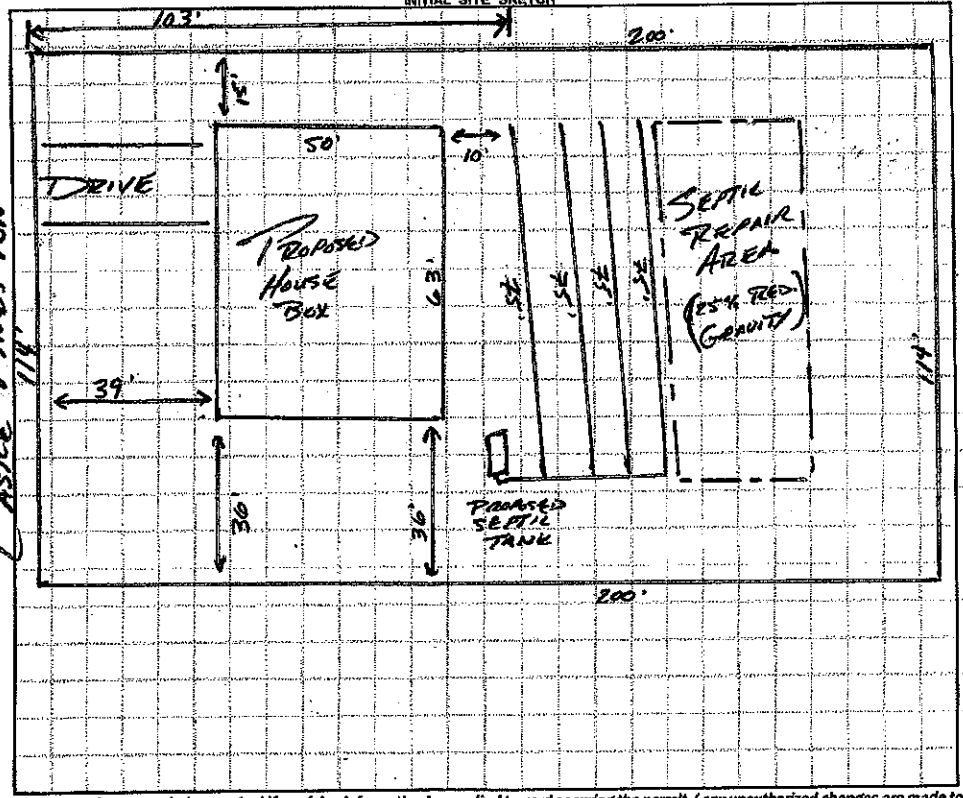
Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Follow All NC SEPTIC Rules.

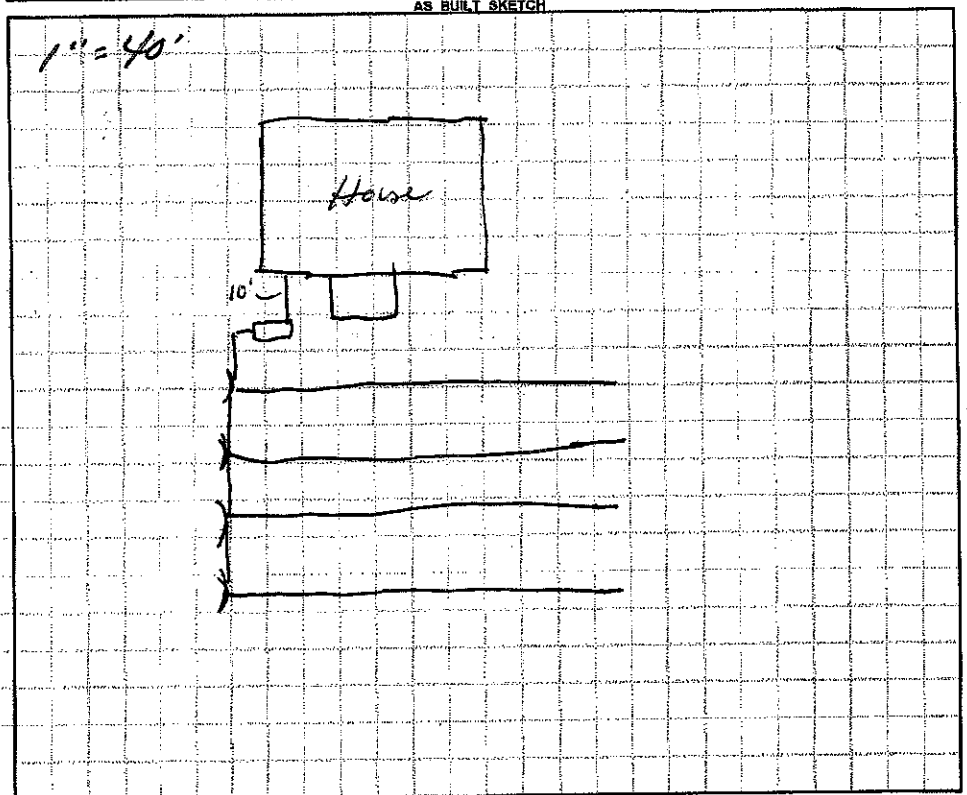
Gravity 25% reduction

1 Manif.

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: Kenneth Watt Date: 12-8-16 Installed by: Young Grading

IMPROVEMENT PERMIT by: APPROVED AUG 05 2016 OPERATION PERMIT by: B. Bottoms Date: 4/12/17

AUTHORIZATION TO CONSTRUCT by: Date: 12/2/16 Existing System Inspected by: Date:

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