KA WATT CI

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 CI MOORESVILLE 704-664-5281 20351/2

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

PERMIT# 109274 PIN# ~~4716-04-1297~~ 4706-94-6446 DATE 10/24/02

OWNER OR CONTRACTOR Kenneth A. Watt PHONE: ~~Business~~ Cell 902-4495 Home (704) 876-0047

ADDRESS 129 Beckham Road Statesville N.C. 28625

LOCATION Hwy 90 W, (L) Scotts Creek Rd, (R) on Robert Drive, Corner of Robert and Mobeal

SUBDIVISION Larkin Skaggs Estate BLOCK / SECTION — LOT 26 LOT AREA 1.15 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. - 30 gpd/ft2

Septic Tank: 4000 Gallons; STB 1012 Date 8-30-02
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 30/33 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

☒ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: Gravity, Conventional
Repair System Description: Gravity, Conventional
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2½
☐ Business No. Employees ____
☐ Other _____

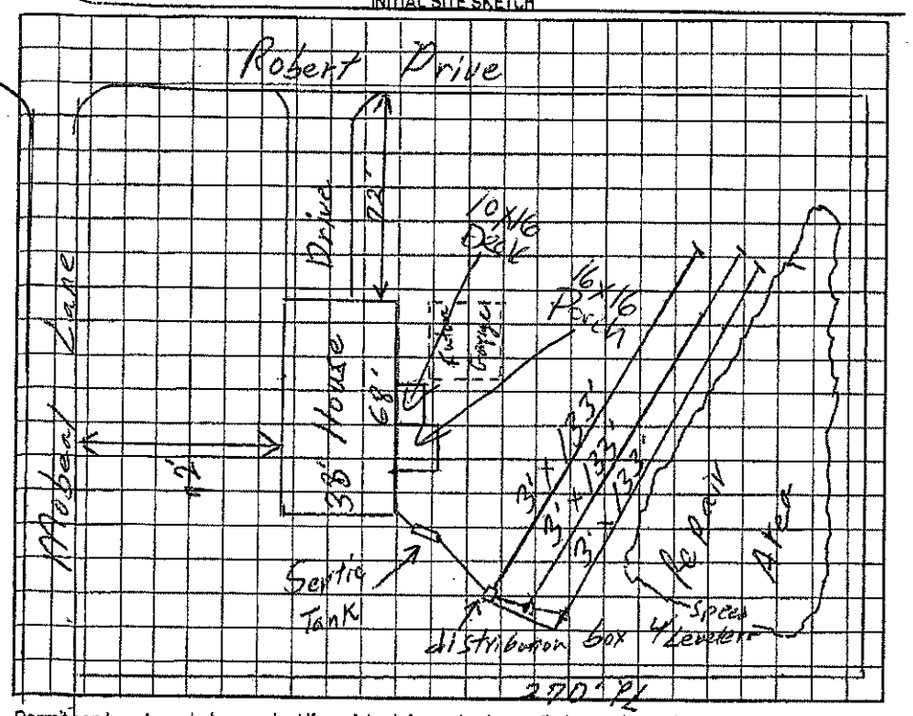
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions: (1) Install lines on Contour w/ distribution box w/ 4 speed levelers

Comments:/Conditions: — ST Marker + Tuff Tite filter installed

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Shown per

Location of the proposed 16x16 Porch 10x16 Deck addition does not appear to impact the existing on-site septic system or well.**NOTE:

REHS Date: 05/23/14
ICHD-Environmental Health Division

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 10-28-02 Installed by: David Yount

Improvement Permit by: William O. Johnson date 10/24/02 Operation Permit by: William O. Johnson date 5/2/03

Authorization to Construct by: William O. Johnson date 10/24/02 Existing System Inspection by: _____ date _____

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