IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 081168 PIN# 4716 73 4331 (PT) DATE 5-15-99

OWNER OR CONTRACTOR CRANDALL O'BRIEN CONST. PHONE: Business 871-1536 Home

ADDRESS 310 TREEBARK ROAD, STATESVILLE, NC 28625

LOCATION NC 90 W, TR LITTLE FARM RD, TL WHEATLAND LAND, AT CUL-DE-SAC ON RIGHT

SUBDIVISION SUMMERSET BLOCK / SECTION LOT 9 LOT AREA 0.528 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 7.20-99

Pump Tank: 1000 Gallons; PT 17 Date 10-19-99

Pump Make: HYDROMATIC Model SHEF 50A Serial No.

Nitrification Field: No Fields 1 Square Feet EQ.TO 1200 Linear Feet 300+

No Lines FIVE Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 6" SAND

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

System Description: 25% REDUCTION, PUMP

Repair System Description: ~~50%~~ 25% REDUCTION PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

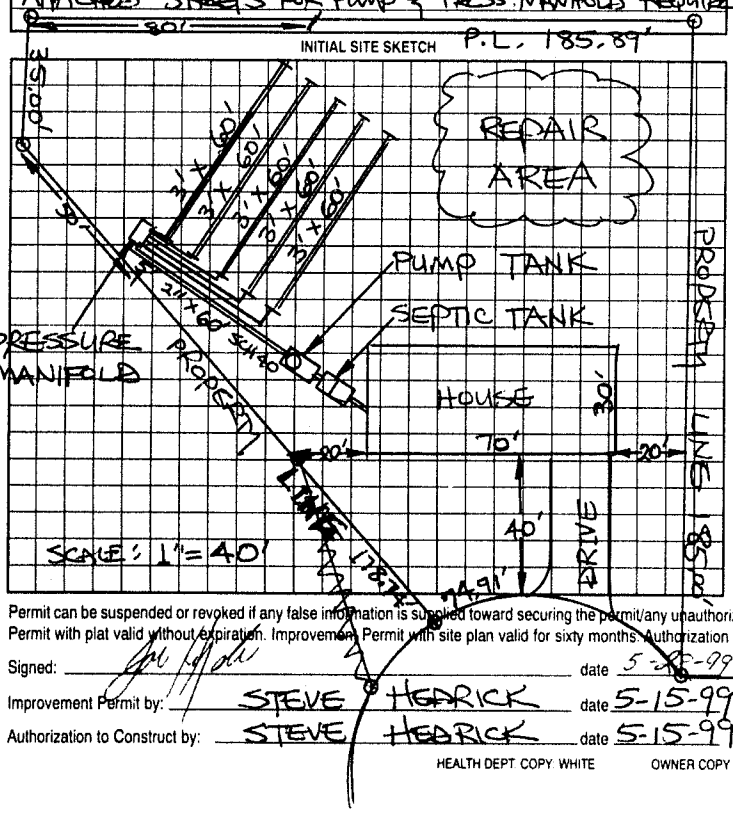
☐ Other

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

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions ① INSTALL 25% REDUCTION SYSTEM USING FIFTY (50) CHAMBERS OR THIRTY (30) HDS SECTIONS ② SEE ATTACHED SHEETS FOR PUMP & PRESS. MANIFOLD REQUIREMENTS.

INITIAL SITE SKETCH



Comments/Conditions ① SEPTIC TANK WITH RISERS AND MARKER INSTALLED USING "POLYLOK" FILTER ② SYSTEM PRESSURE CHECKED 11-18-99. RSH ③ DRAINFIELD CHECKED 11-18-99 RSH

AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: _____ date 5-15-99 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 5-15-99 Operation Permit by: STEVE HEDRICK date 12-6-99

Authorization to Construct by: STEVE HEDRICK date 5-15-99 Existing System Inspection by: _____ date _____

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