IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 073001 PIN# 4716 83 0049 DATE 6-6-98

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

ADDRESS 310 TREEBARK ROAD, STATESVILLE, NC 28625

LOCATION NC 90 WEST, TR LITTLE FARM ROAD, TL WHEATLAND DRIVE, 1ST LOT ON LEFT

SUBDIVISION SUMMERSET BLOCK / SECTION ____ LOT 1 LOT AREA 0.460 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 10-16-97
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CHAMBER OR H.D.S. GRAVITY
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

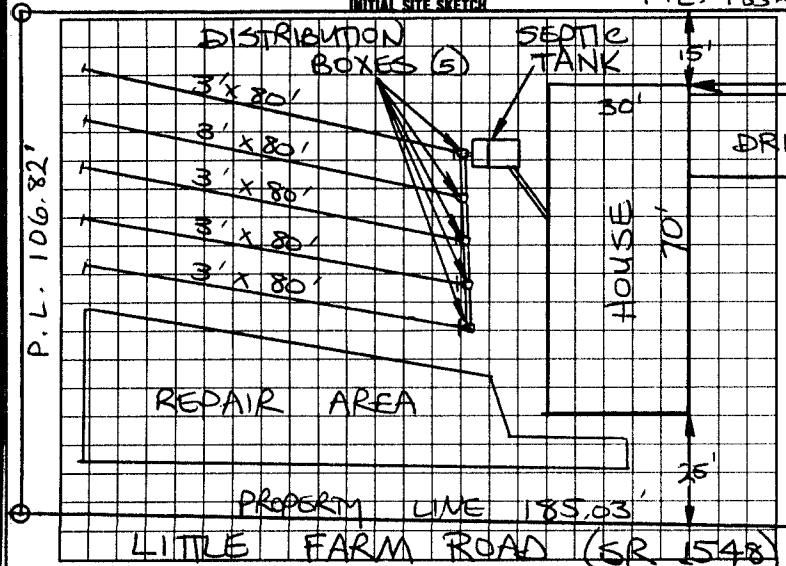
Water Supply: ☐ Individual ~~☑~~ Public ☐ Community

Comments:/Conditions:

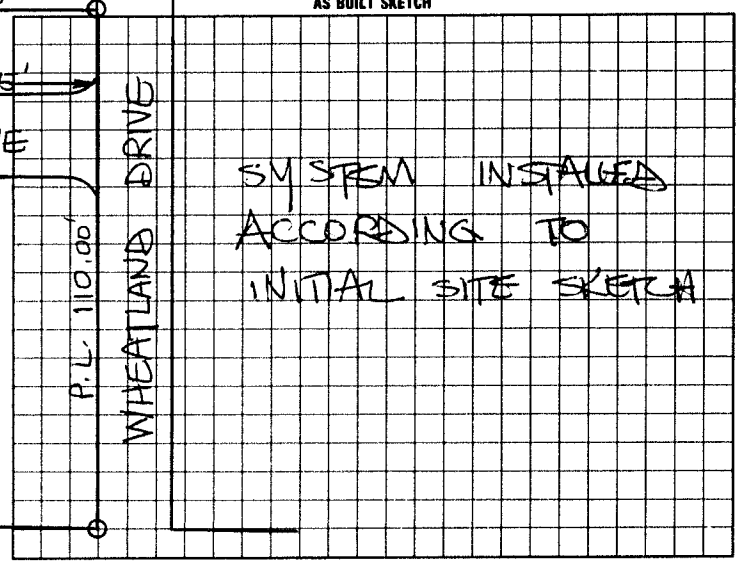
Comments:/Conditions: (1) SEPTIC TANK W/ RISERS INSTALLED USING "POLYLOK" FILTER (2) SYSTEM INSTALLED DURING WET SOIL CONDITIONS

SCALE: 1" = 30'

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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: [signature] date 6-7-98 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 6-6-98 Operation Permit by: STEVE HEDRICK date 1-25-00

Authorization to Construct by: STEVE HEDRICK date 6-6-98 Existing System Inspection by: ____ date ____

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