IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 086122 PIN# 4717 53 5516 DATE 11-23-99

OWNER OR CONTRACTOR RACHEL McDANIELS PHONE: Business Home 872-7059

ADDRESS 2150 OLD WILKESBORO ROAD, STATESVILLE NC 28625

LOCATION NC 115 N, TL MIDWAY ROAD, 12TH LOT ON RIGHT PAST LAURA JEANNE DRIVE.

SUBDIVISION MTN. VIEW EST BLOCK / SECTION ____ LOT 1 LOT AREA 1.08 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GAD/FT2

Septic Tank: 1000 Gallons; STB 1012 Date 1-30-99

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"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: 25% REDUCTION GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth 12"

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

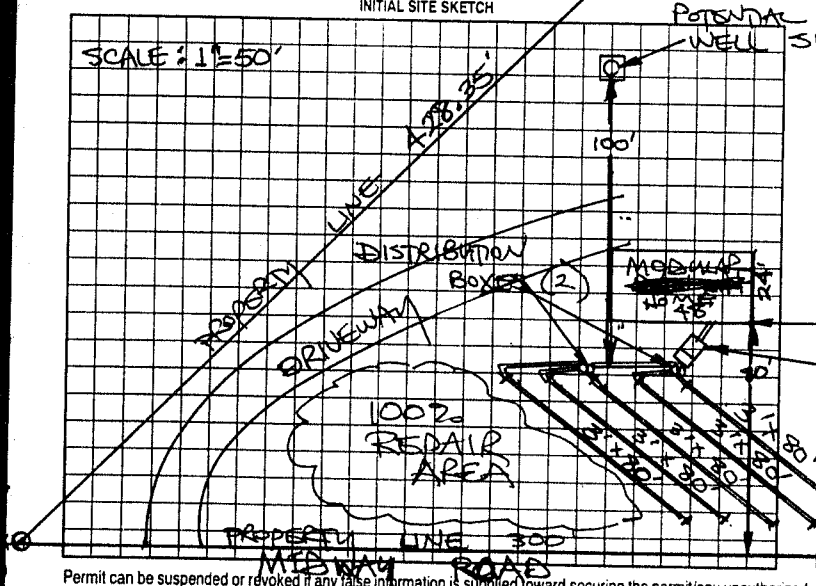
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

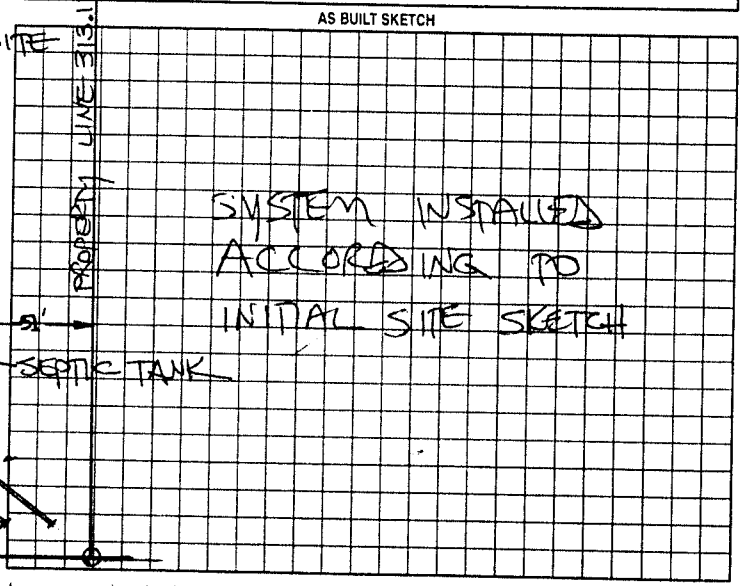
Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK FILTER

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: [signature] date 11-23-99 Installed by: STEVE JORDAN

Improvement Permit by: STEVE HEARICK date 11-23-99 Operation Permit by: STEVE HEARICK date 12-9-99

Authorization to Construct by: STEVE HEARICK date 11-23-99 Existing System Inspection by: ____ date ____

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