IREDELL COUNTY HEALTH DEPARTMENT

CI

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

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

PERMIT# 109383 PIN# ~~4717-87-2018-B~~ 4717-86-1959 DATE 1/2/03

OWNER OR CONTRACTOR Barry Carter PHONE: Business _____ Home (704) 876-1052

ADDRESS 228 Cove Gap Road, Statesville N.C. 28625

LOCATION 115 North, @ Midway Rd, @ Cove Gap Rd 2nd House on Right

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA .994 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .30 gpd/ft²

Septic Tank: 1,000 Gallons; STB 160 Date 9-17-02

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3@133 Trench Width 36" Max Trench Bottom Depth 36" 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 2

☐ Business No. Employees ____

☐ Other _____

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

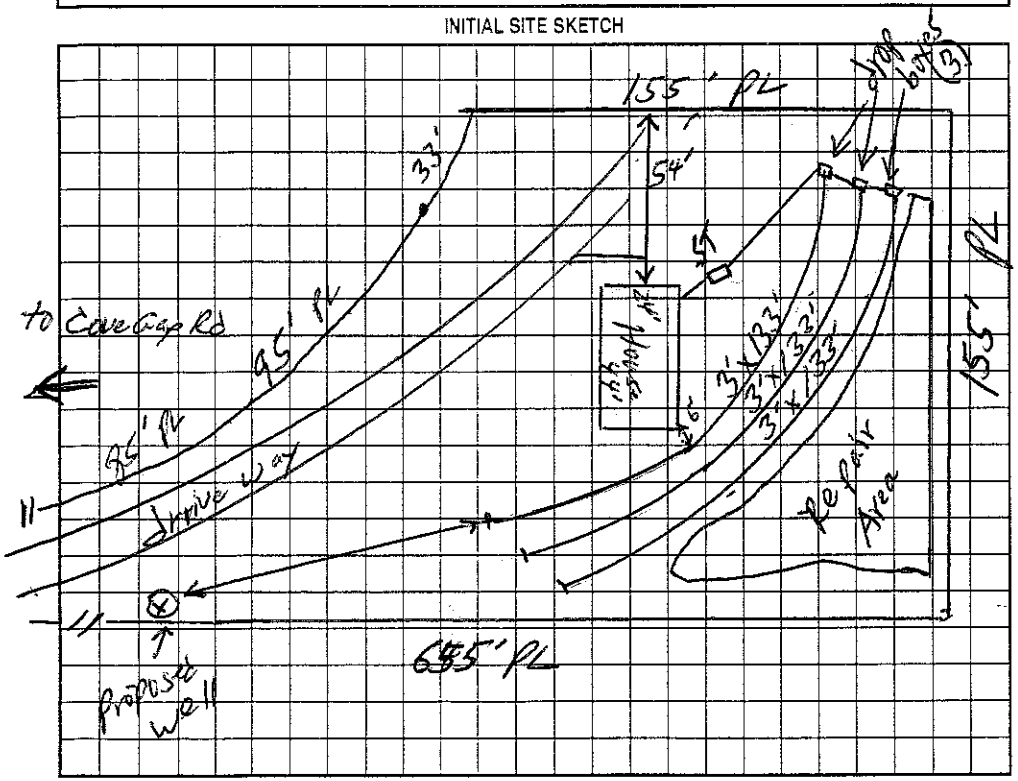
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: (1) Install liner on Contour (2) maintain proper setbacks

Comments:/Conditions:

- Zabel Filter Installed
- ST marker Installed

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Shown per 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: Barry Carter date 1-7-03

Improvement Permit by: William O. Johnson date 1/7/03

Authorization to Construct by: William O. Johnson date 1/7/03

Installed by: Leatherman's Septic

Operation Permit by: William O. Johnson date 1/10/03

Existing System Inspection by: _____ date _____

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