IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 163180 PIN # 4718-26-6867 DATE 17 September 10

OWNER or APPLICANT Roy Dellinger PHONE: Business (704) 876-2896 Home:

OWNER or APPLICANT ADDRESS 602 Pisgah Ch. Rd. Statesville

LOCATION / DIRECTIONS 115N to Pisgah Ch. Rd. 2mi t on Rt.

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 1.818ac. DESIGN FLOW 360 L.T.A.R.

Septic Tank Exist. Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields Exist No Lines Linear Feet Exist

Trench Width Exist Max. Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type I II III IV V VI

System Description: Gravel trench

Repair System Description:

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

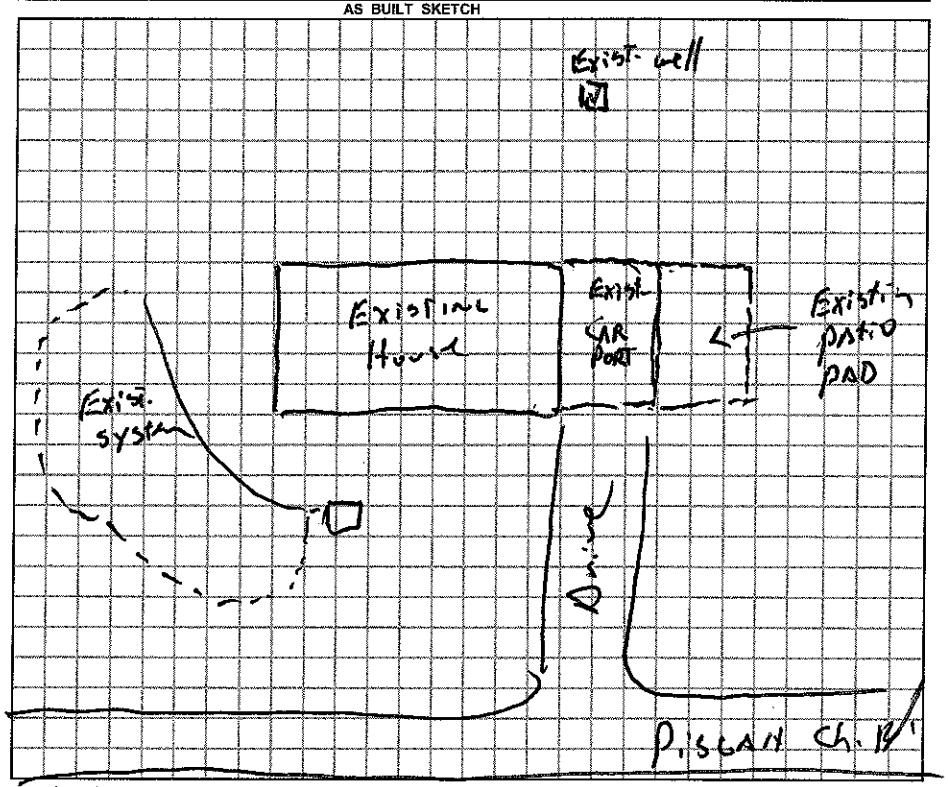
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions

Comments / Conditions * Patio cover will not impact the existing septic or repair system areas.

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Date

Improvement Permit by: Date

Authorization to Construct by: Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by:

Operation Permit by: Date:

Existing System Inspected by: R.S. Date: 17 Sept/10

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant