IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (I) MOORESVILLE 704-664-5281

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

PERMIT# 126906 PIN# 4718-93-8213 DATE 4-20-05

OWNER OR CONTRACTOR JAMES ELLIOTT PHONE: Business (704) 902-3902/978-2547 Home (704) 872-4175

ADDRESS 110 CREEKSIDE DR. STATESVILLE NC 28625

LOCATION HWY 115 N TL PISGAH RD. TL TREEBARK TR HIDDEN RIVER LOT ON RT (140 HIDDEN RIVER LN)

SUBDIVISION HIDDEN RIVER BLOCK / SECTION ____ LOT 5 LOT AREA 2.507 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 gpd/ft²

Septic Tank: 1000 Gallons; STB 825 Date 3-9-06
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines 4 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: PUMP 25% REDUCTION
Maintenance Agreement Required: ☐ Yes ☑ No

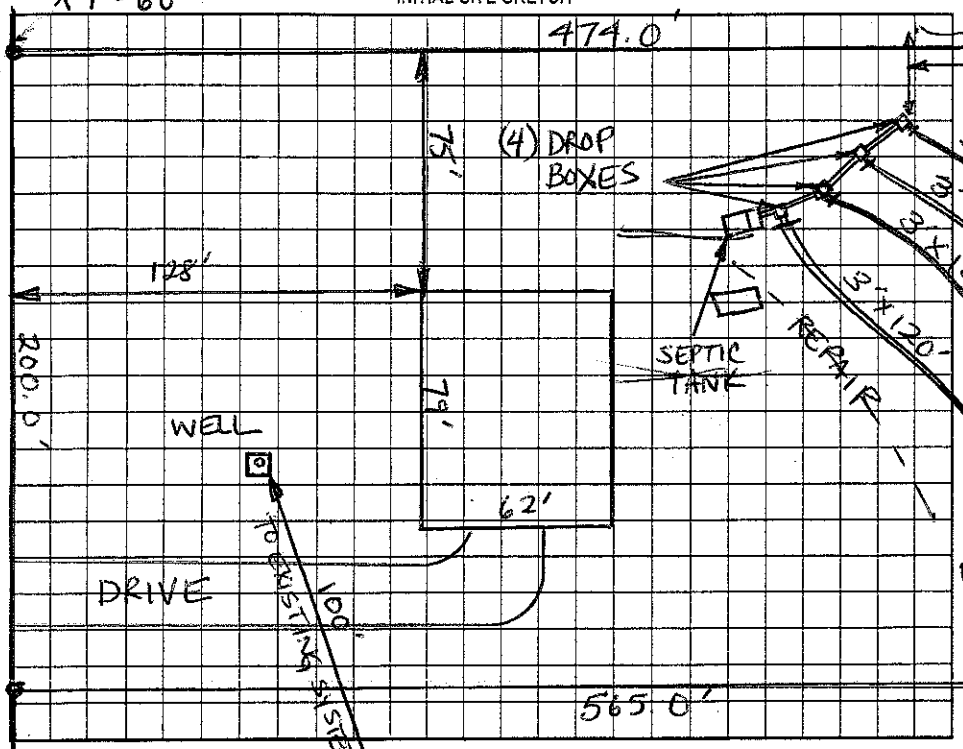
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

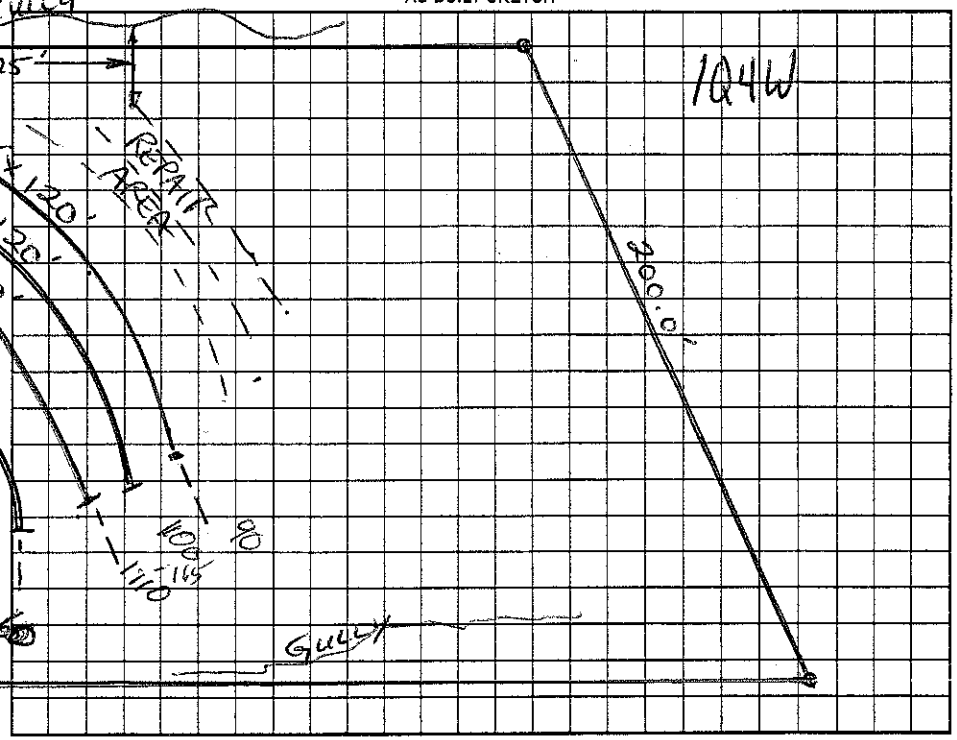
Comments:/Conditions ① INSTALL LINES 30" ON CONTOUR
② MAINTAIN 100' SETBACK FROM WELL W/ NEIGHBORS SYSTEM
③ SMOOTH OUT ROUGH TOPOGRAPHY

Comments:/Conditions:
4 NEW SYSTEM Blue Poylock Filter
no risers/ST marker

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: James Lloyd Elliott date 4-25-05 Installed by: Andy Daniels

Improvement Permit by: Christopher M. Harrell PS LSS date 4-20-05 Operation Permit by: James Elliott date 5-4-06

Authorization to Construct by: Christopher M. Harrell PS, LSS date 4-20-05 Existing System Inspection by: ____ date ____

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