IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 177247

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

PIN # 4722397053

APPLICANT: Larry Munday APPLICANT ADDRESS: 673 Shiloh Rd Statesville, NC

SITE ADDRESS: 119 Olano Lane, Statesville NC 28677 PHONE: 704 872-6019 ALT. PHONE: 704 872-6019

SITE DIRECTIONS: Buffalo Shoals South (R) on Olano Rd. property on left

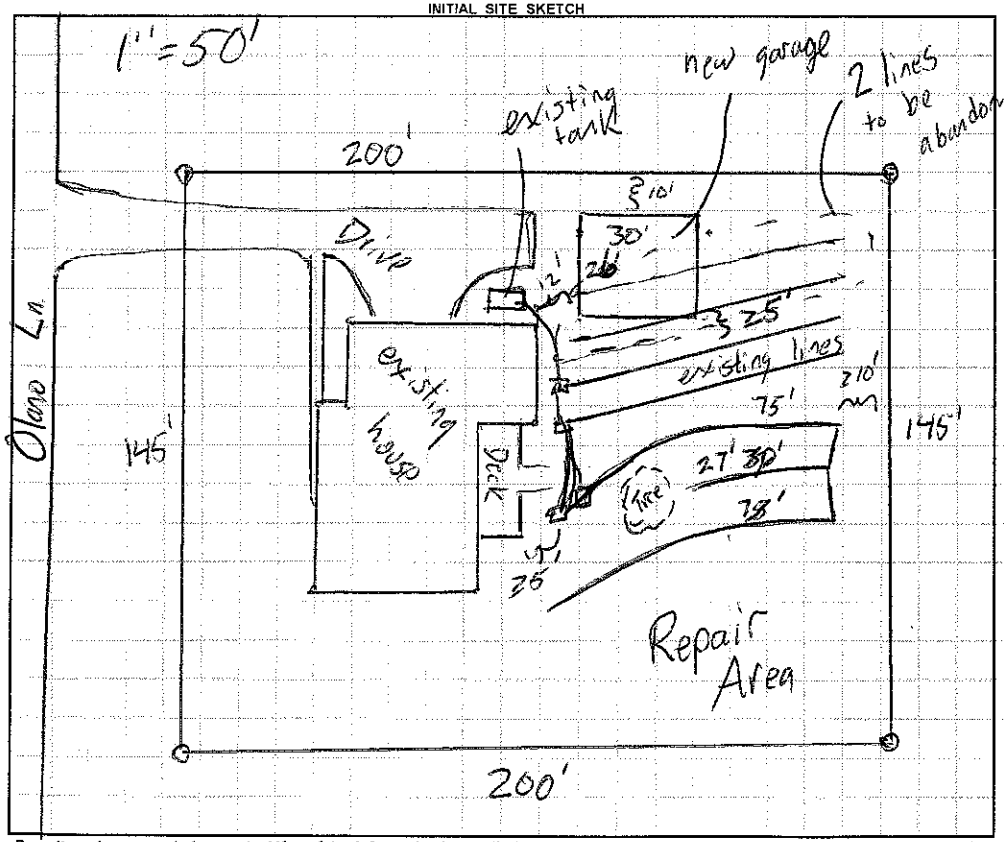
SUBDIVISION: Kyles Woods SECTION: 2 LOT # 17 LOT AREA: .666 Acres DESIGN FLOW: 360 L.T.A.R.: .25

Septic Tank	1000 (gal)	STB	1012	Date	9/11/12	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT		Date		System Description:	25% Reduction Gravity			☐ Business	No. Persons
Pump Make		Model		Serial #		Repair System Description:	50% Reduction LP			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	3	Linear Ft:	180	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	36"	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing	☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Use existing tank, add 180 feet of 25% Reduction, not abandon first two lines of system

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: Larry Munday Date: 4-2-13 Installed by: Yountz Grading

IMPROVEMENT PERMIT by: Date: 4-2-13 OPERATION PERMIT by: Date: 4-8-13

AUTHORIZATION TO CONSTRUCT by: Date: 4-2-13 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK