IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093921 PIN# 4722 676327

OWNER OR CONTRACTOR HERITAGE BLDG CO PHONE: Business 528-6644 Home DATE 02-07-01

ADDRESS 120 HICKORY PT CT, STATESVILLE, NC 28677

LOCATION OMR @ RIMPLE HILL RD, @ LIZARD SPRINGS CT, ON RIGHT

SUBDIVISION LIZARD SPRINGS BLOCK / SECTION LOT 145 LOT AREA .169 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 4-22-01
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'
No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONV GRAV
Repair System Description: 25% REDUCT
Maintenance Agreement Required: ☐ Yes ☒ No

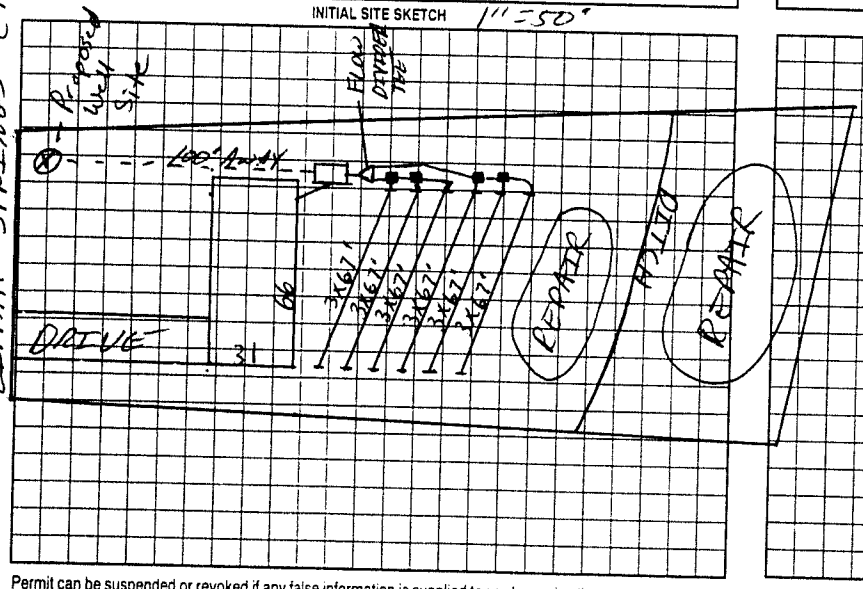
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community
WELL

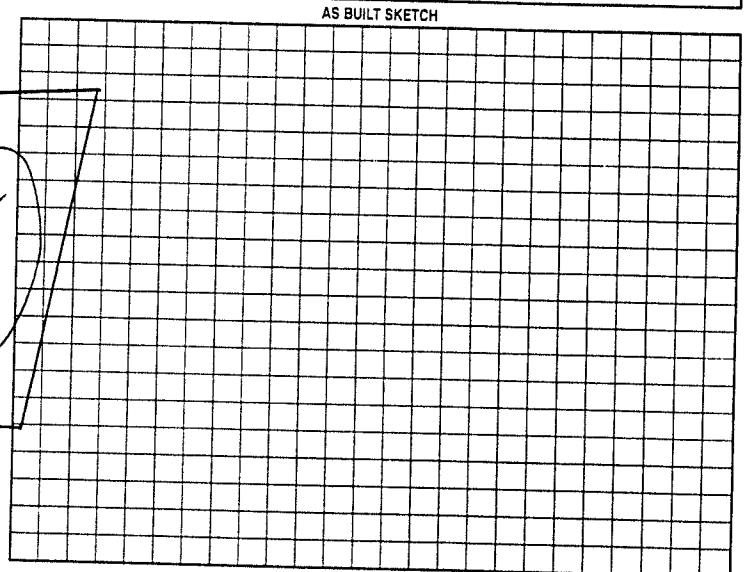
Comments/Conditions: ① KEEP SYSTEM 100' AWAY FROM WELL ② USE FLOW DIVIDER TEE & 4 DROP BOXES ③ INSTALL LINES ON CONTOUR & KEEP SYSTEM 10' OFF PROPERTY LINES & 5' OFF HOUSE

Comments/Conditions: POLYLOK FITTER & MARKER INSTALLED AS SHOWN

INITIAL SITE SKETCH 1" = 50'



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: date 3-2-01 Installed by: TOMMY FRYE

Improvement Permit by: date 02-07-01 Operation Permit by: PSI date 7-11-01

Authorization to Construct by: PSI date 02-07-01 Existing System Inspection by: date

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