IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 127563 PIN# 4722-96-1950 DATE 2-24-06

OWNER OR APPLICANT All Season's Contracting / Randall Myers PHONE: Business 704-878-0616 Home 704-902-3199

ADDRESS P.O. Box 7227 Statesville NC 28687

LOCATION 21 South (R) Old Mtn Rd (R) Wallace Springs Rd (L) Charles on right

SUBDIVISION Williams Farm BLOCK / SECTION ____ LOT 41 LOT AREA .955 AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1027 Date 9-26-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ=1600 Linear Feet 50'
No Lines 1 Trench Width 36 Max Trench Bottom Depth 20" TB Gravel Depth N/A

☐ New System ☐ Repair ☒ Expansion System Type: I (II) III IV V VI
System Description: Gravity 25% Reduction
Repair System Description: Gravity 50% Reduction
Maintenance Agreement Required: ☐ Yes ☒ No
☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

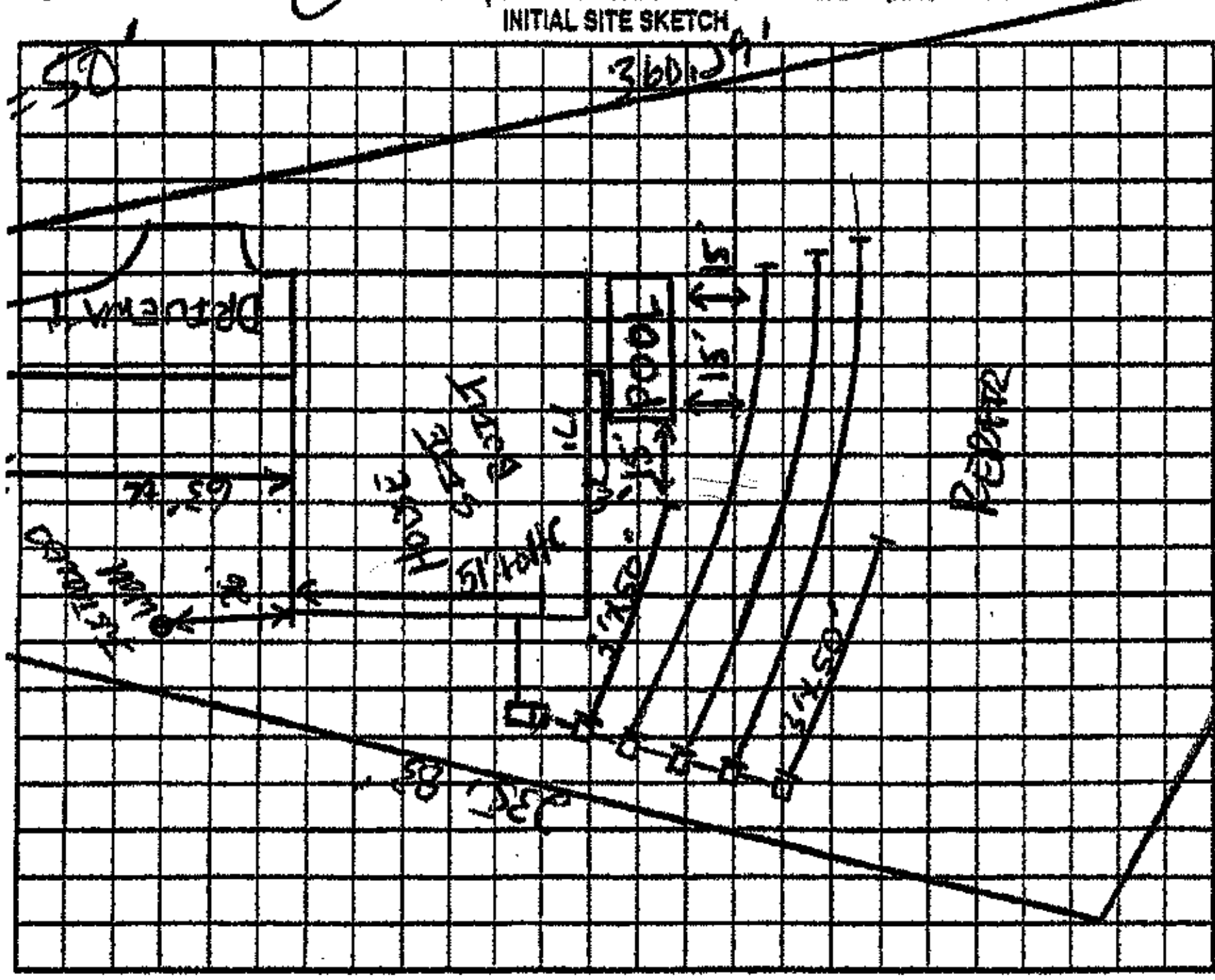
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other ____
No. Bedrooms 4 No. Persons 8 No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

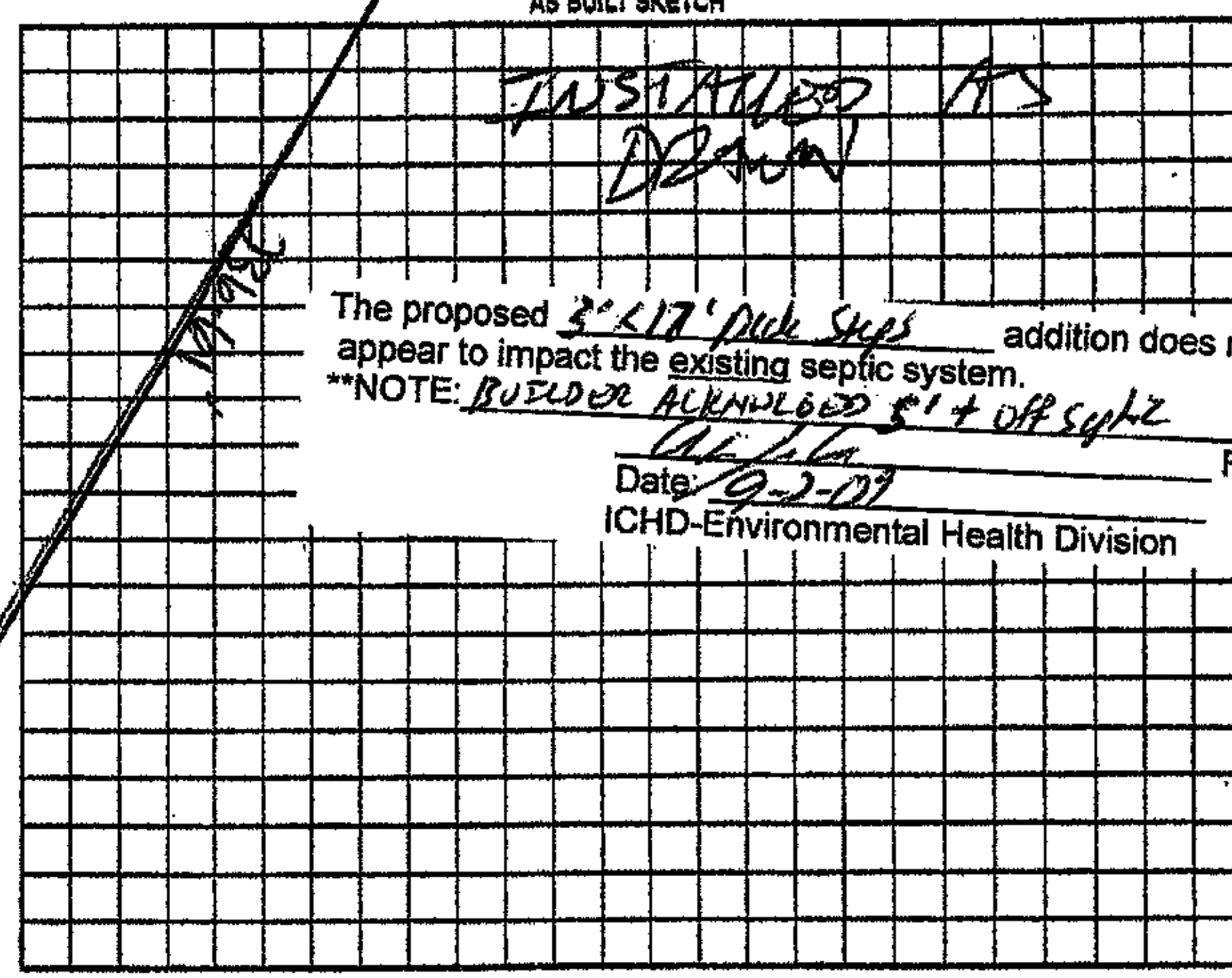
Comments:/Conditions: (1) Take off 50' on 1st line, add it to bottom as drawn so pool setbacks can be maintained (2) System is installed but not being used yet. (3) Note maximum trench bottom depth

Comments:/Conditions: (4) Note maximum TB depth (5) House plans, zoning, + sites are still valid from original permit

INITIAL SITE SKETCH



AS BUILT SKETCH



Installed as drawn

The proposed 3'x17' deck steps addition does not appear to impact the existing septic system.
**NOTE: Builder acknowledged 5' + off site
____ R.S.
Date: 9-2-09
ICHD-Environmental Health Division

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: [signature] date 2/24/06
Improvement Permit by: [signature] date 2-24-06
Authorization to Construct by: [signature] date 2-24-06

Installed by: Adams Grading
Operation Permit by: [signature] RS date 2-28-06
Existing System Inspection by: ____ date ____

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