IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 109881 PIN# 4722-96-4446 DATE 11-18-02

OWNER OR CONTRACTOR RANDALL MYERS PHONE: Business 704-902-3199 Home 704-878-0616

ADDRESS 2534 Hickory Hwy, STATESVILLE, NC 28677

LOCATION WALLACE SPRINGS ROAD, TR CHARIS LANE, 4TH LOT ON LEFT PAST SHALOM

SUBDIVISION WILLIAMS FARM BLOCK / SECTION 3 LOT 34 LOT AREA 0.735 ACRE SITE CLASS. BS DESIGN FLOW 360 L.T.A.R. 0.40 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 3-27-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

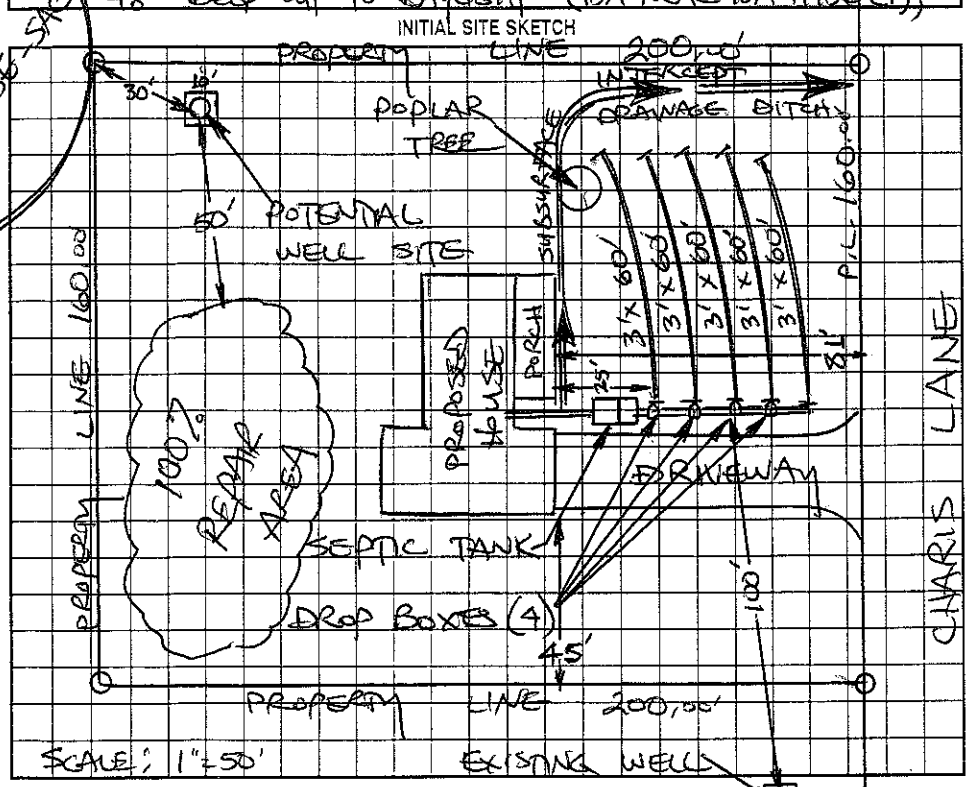
☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: 50% REDUCTION, Pump
Maintenance Agreement Required: ☐ Yes ☐ No

☑ 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 INITAL SYSTEM MINIMUM 100 FEET FROM ANY WELL (15A NCAC 18A.1956(6)(a)) (NOT REPAIR)
② INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH BEGINNING 48" DEEP OUT TO DAYLIGHT (15A NCAC 18A.1956(4))

INITIAL SITE SKETCH



Comments:/Conditions:
- Polyloft filter + ST marker Installed

AS BUILT SKETCH

Installed As Shown per Initial Site 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: Luke K. M date 11-18-02
Improvement Permit by: STEVE HEDRICK date 11-18-02
Authorization to Construct by: STEVE HEDRICK date 11-18-02

Installed by: Adams Grading
Operation Permit by: William E. Johnson date 5/16/03
Existing System Inspection by: _____ date _____

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