IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4724-94-1908 DATE 8-31-05

OWNER OR CONTRACTOR PEGGY ESPES LOWTHARPE PHONE: Business c/o 704-878-5091 Home 704-872-9660

ADDRESS 2329 CLINE STREET STATESVILLE NC 28677-3613

LOCATION US 64 TO WOOTEN STREET, CONTINUE CLINE STREET 2ND HOUSE ON RIGHT

SUBDIVISION WESLEY HEIGHTS BLOCK / SECTION ____ LOT 24-26 LOT AREA LIMITED SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields ____ Square Feet ____ Linear Feet EXISTING

No Lines ____ Trench Width ____ Max Trench Bottom Depth ____ Gravel Depth ____

☐ New System ☑ Repair System Type: I, II, III, IV, V, VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

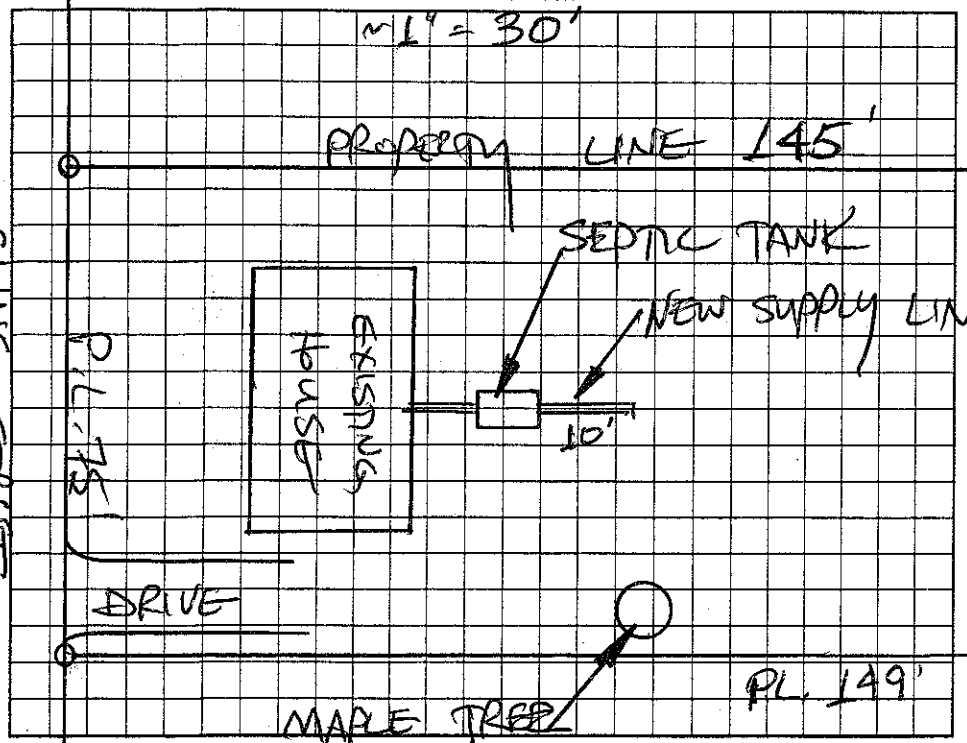
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ ~~Public~~ ☐ Community

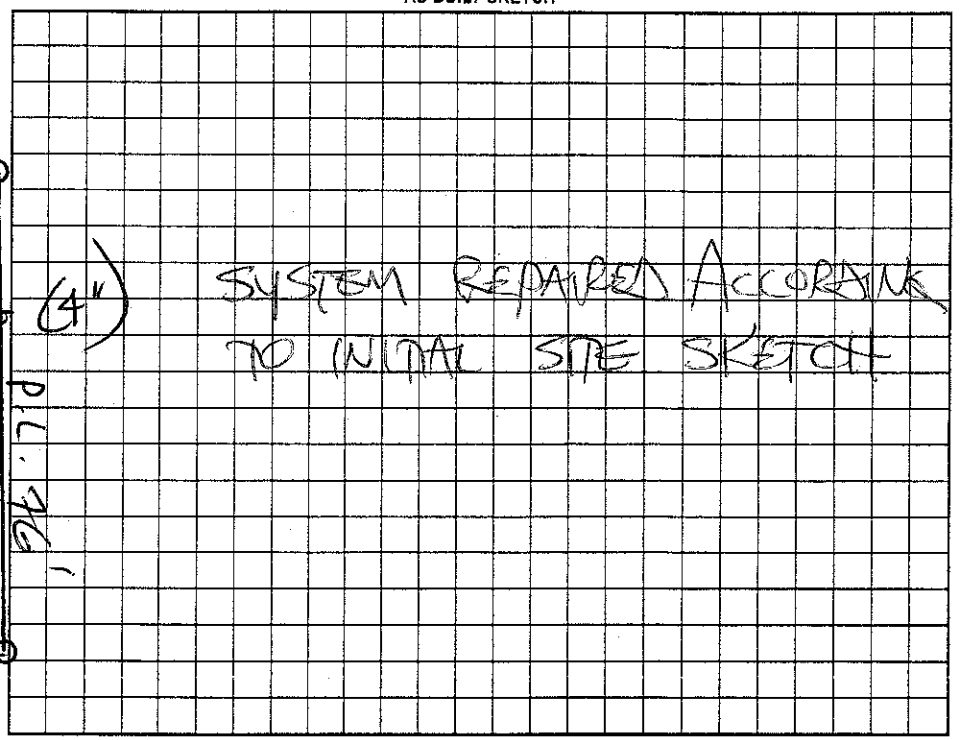
Comments:/Conditions: ① REMOVE EXISTING MAPLE TREE ② INSTALL NEW SANITARY TEE IN SEPTIC TANK ③ EXCAVATE SUPPLY LINE TO REPLACE SECTION CLOGGED AS SHOWN. TIE BACK INTO EXISTING DRAINLINE

Comments:/Conditions:

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: peggy E Lowtharpe date 8 31 05 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 8-31-05 Operation Permit by: STEVE HEDRICK date 1-17-06

Authorization to Construct by: STEVE HEDRICK date 8-31-05 Existing System Inspection by: ____ date ____

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