138383

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 136945 PIN# 4725-11-1272 1369 DATE 8-8-06

OWNER OR APPLICANT BRAWSON B. ANDERSON PHONE: Business 704-902-1024 Home 704-872-8298

ADDRESS 229 MARBLE RD, STATESVILLE, NC 28625-2351

LOCATION NC 90 WEST, TL MARBLE ROAD, TL AT CURVE, ~1200' BACK off ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT 2 LOT AREA 3.095 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .30 GPD/FT²

Septic Tank: 1000 Gallons; STB TP-STB Date 3-3-06
Pump Tank: _____ Gallons; PT 1012-1000 Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet EQ. TO 1200 Linear Feet 300
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 32"

☑ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 25% REDUCTION GRAVITY
Repair System Description: 25% REDUCTION, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth N/A ☑ Gravity ☐ Pressure

☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other _____

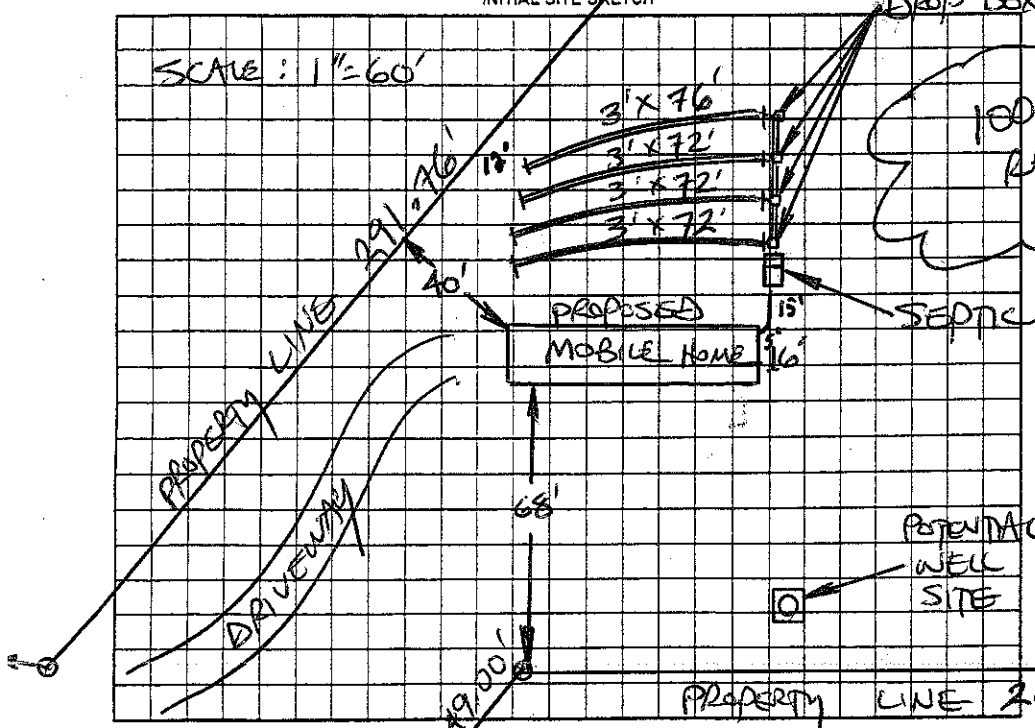
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

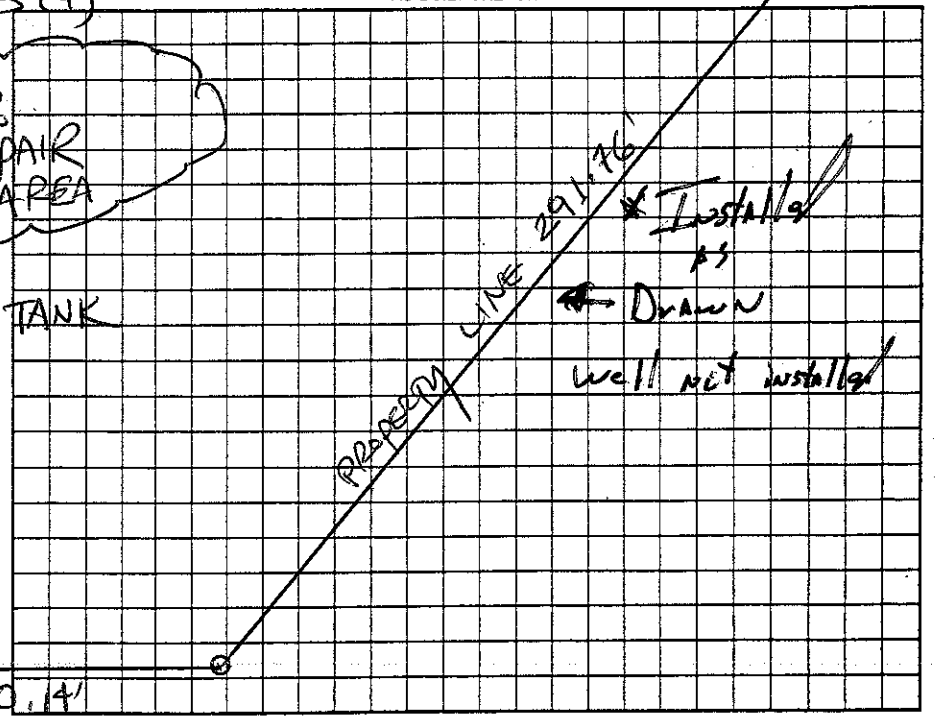
Comments/Conditions: ① KEEP SYSTEM MINIMUM 100 FEET FROM WELL ② INSTALL 25% REDUCTION SYSTEM ON CONTOUR NO DEEPER THAN 32".

Comments/Conditions: Quick-4-Infiltrator ST HAS Marker, PROPERTY LINE 390.14'

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.

P.L. 122.57'

Signed: _____ date 8-10-06 Installed by: Chase, Anderson

Improvement Permit by: STEVE HEDRICK date 8-8-06 Operation Permit by: _____, R.S. date 30 Oct. 06

Authorization to Construct by: STEVE HEDRICK date 8-8-06 Existing System Inspection by: _____ date _____

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