IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 071015 PIN# 4717137410 (PART) DATE 12-31-97

OWNER OR CONTRACTOR AARON L. KENNEDY PHONE: Business Home 873-6063

ADDRESS 153 WILDFLOWER LANE, STATESVILLE, NC 28625

LOCATION NC 115 N, TL MIDWAY ROAD, TR BAUER DRIVE, 1000 FEET ON LEFT

SUBDIVISION HENRY BAUER BLOCK / SECTION LOT 27, PT 24/28 LOT AREA 2.000 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.33 SQ FT/FT²

Septic Tank: 1000 Gallons; STB 1017 Date 5-19-98

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

No Lines THREE 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: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

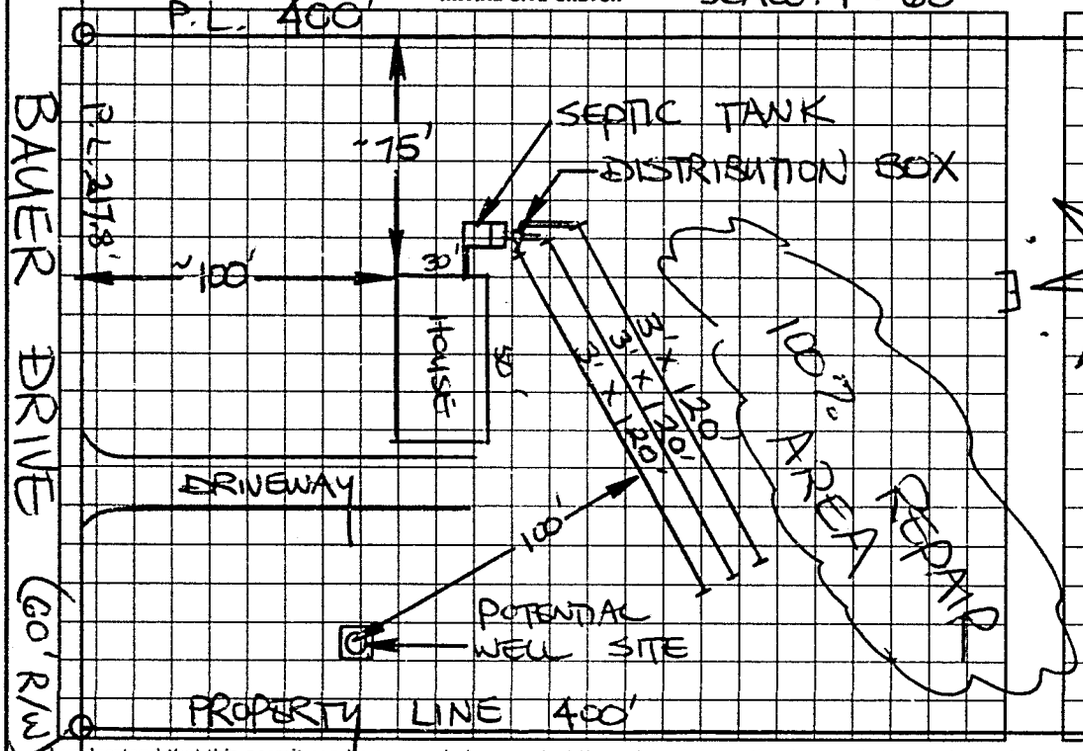
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

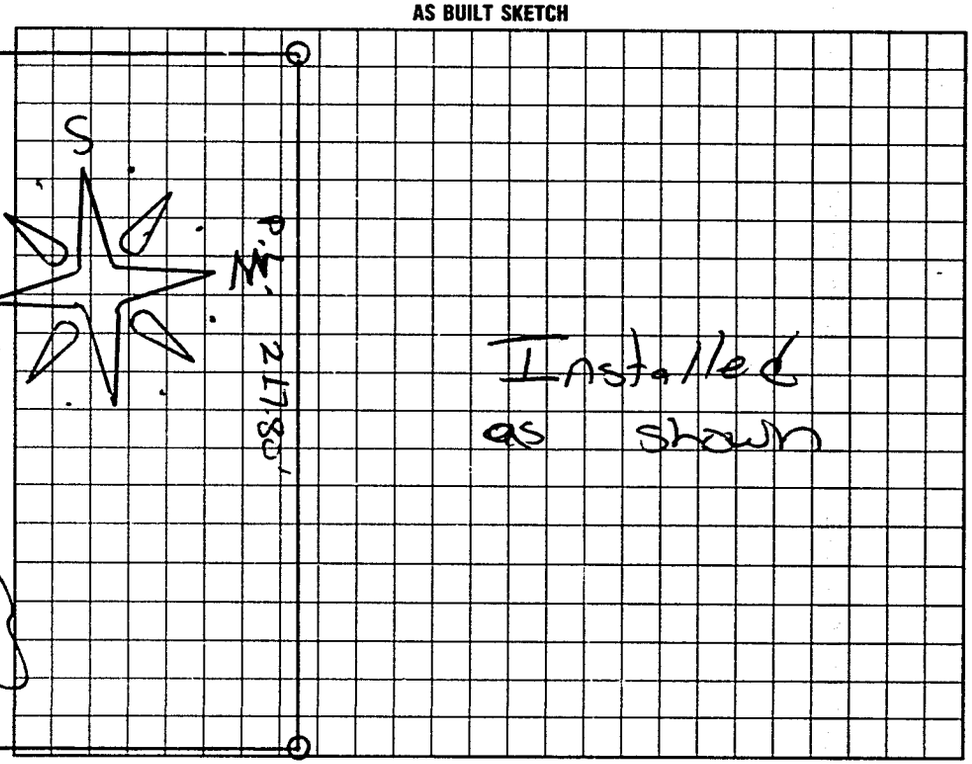
Comments:/Conditions: ① KEEP SYSTEM MINIMUM 100' FROM WELL ② INSTALL LINES ON CONTOUR AS FLAGGED

Comments:/Conditions:

INITIAL SITE SKETCH SCALE: 1" = 60'



AS BUILT SKETCH



I understand that this 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

Improvement Permit by: STEVE HEDRICK date 12-31-97

Authorization to Construct by: STEVE HEDRICK date 12-31-97

Installed by: A-1 Backhoe

Operation Permit by: Mat Cox RS date 7-16-98

Existing System Inspection by: date

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

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