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# 4725 96 6509 DATE 1-28-00

OWNER OR CONTRACTOR JEFF & RHONDA TAYLOR PHONE. Business _____ Home 871-1969

ADDRESS 113 FLATROCK LANE, STATESVILLE NC 28625

LOCATION NC 115 N, TL OLD WILKESBORO ROAD, TL FLATROCK LANE, HOUSE ON LEFT AT CURVE

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA AMPLE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 300 Linear Feet 100 FEET

No Lines ONE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 24"

☐ 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 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees ____

☐ Other _____

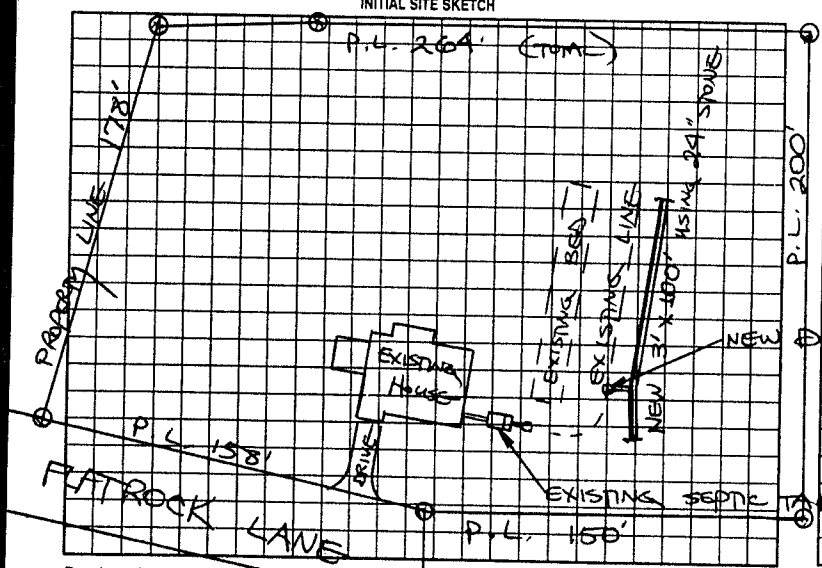
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments:/Conditions: ① INSTALL NEW DROP BOX IN EXISTING DRAIN LINE ② INSTALL NEW 3'x 100' LINE USING 24" STONE ③ SYSTEM TO BE REPAIRED BY 2-29-00 ④ THIS PERMIT SERVES AS NOTICE OF VIOLATION

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED ACCORDING TO INITAL 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: _____ date _____ Installed by: C & W GRADING

Improvement Permit by: STEVE HEDRICK date 1-28-00 Operation Permit by: STEVE HEDRICK date 3-1-00

Authorization to Construct by: STEVE HEDRICK date 1-28-00 Existing System Inspection by: _____ date _____

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