# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 118687 PIN# 4726-02-3796 DATE 11-20-04

OWNER OR CONTRACTOR CLAY & ENTRY PHONE: Business 704-902-1537 Home 704-876-9037

ADDRESS 156 KINGSWOOD LANE STATESVILLE NC 28625

LOCATION I-77 (E) SLOTTS CREEK (L) CELTIC RIDGE (R) W DUNDEE CT AT END OF LEFT LOT #26

SUBDIVISION CELTIC RIDGE BLOCK / SECTION ____ LOT 26 LOT AREA 1.571 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .125

Septic Tank: 1000 Gallons; STB 794 Date 5/12/05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 1360
No Lines 6x60' Trench Width 36" Max Trench Bottom Depth 32" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 6 GRAV 250 REDUCT
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

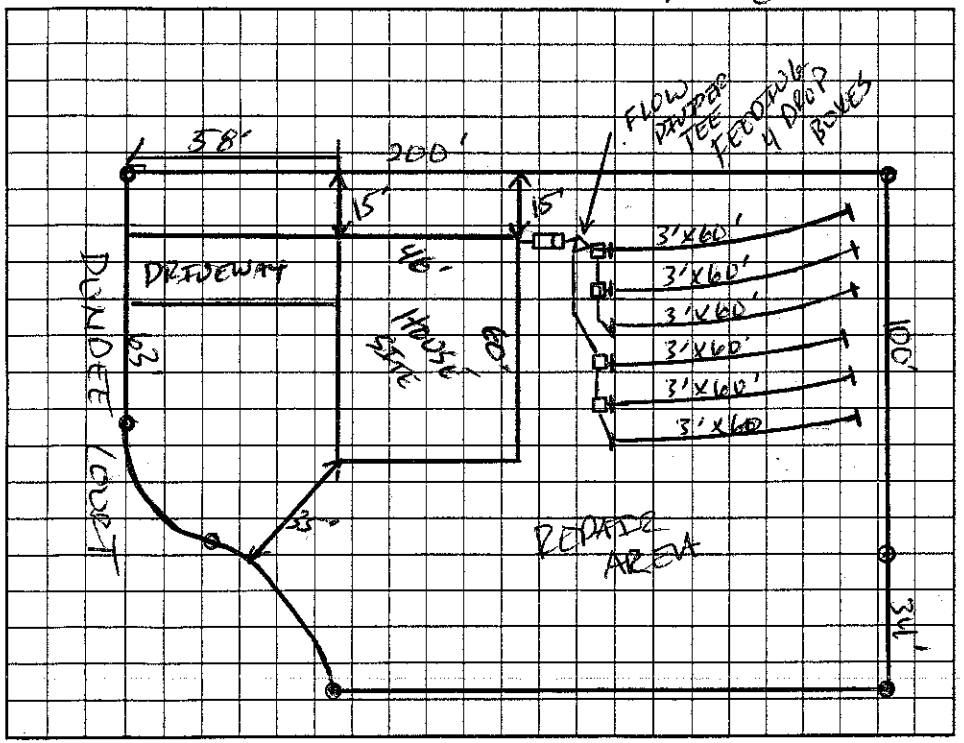
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: (1) THIS IS A LIMITED REPAIR & VOIDS PREVIOUSLY ISSUED PERMIT DATED 3/5/04. (2) NOTE MAXIMUM TRENCH BOTTOM DEPTH

Comments/Conditions: (3) INSTALL LINES ON CONTOURS (4) MAINTAIN SETBACKS

INITIAL SITE SKETCH 1"=50'




AS BUILT SKETCH

INSTALLED AS DRAWN WITH 108 EASYFLO BUNDLES (6 X 3 X 6 INCHES) SEPTIC TANK WITH RED POLYLOK FILTER AND MARKER

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: Clay Gentry date 12-19-04 Installed by: JAMES HUDLER

Improvement Permit by: [signature] date 11-20-04 Operation Permit by: [signature] date 7/1/05

Authorization to Construct by: [signature] date 11-20-04 Existing System Inspection by: ____ date ____

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