IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 087320 PIN# 4726 62 4234 DATE 1-21-00

OWNER OR CONTRACTOR SCOTT JOHNSON PHONE: Business Home 871-8732

ADDRESS 411 BROOKDALE DRIVE, STATESVILLE, NC 28677

LOCATION NC 115 N, TL SCOTTS CREEK, TL MILLER FARM, TR DOE TRAIL, TR ELK, TR CARIBOU, LOT ON (R) AT END

SUBDIVISION DEERCROFT BLOCK / SECTION II LOT 90 LOT AREA 0.5757 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/SF

Septic Tank: 1000 Gallons; STB 1012 Date 2-13-00

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360+

No Lines SIX Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

Bottom Depth SAND 6" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

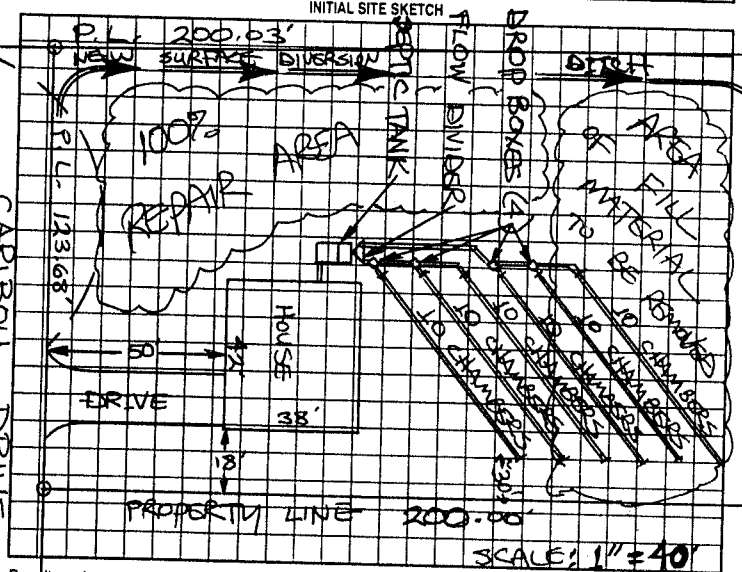
☐ Other ____

Water Supply: ☐ Individual ☑ Public ☐ Community

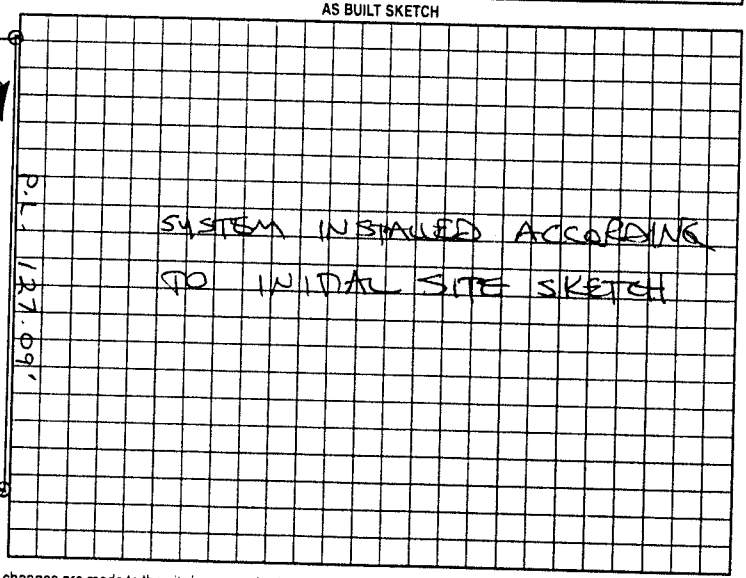
Comments/Conditions: (1) REMOVE FILL MATERIAL DOWN TO NATURAL GRADE (2) INSTALL 25% REDUCTION SYSTEM USING SIXTY (60) CHAMBERS OR THIRTY-SIX (36) HDS SECTIONS AS SHOWN

Comments/Conditions: SEPTIC TANK W/ RISERS INSTALLED USING "POLYLOK" FILTER

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: Scott H. Johnson date 1-24-00

Improvement Permit by: STEVE HEDRICK date 1-21-00

Authorization to Construct by: STEVE HEDRICK date 1-21-00

Installed by: WES LYTTON

Operation Permit by: STEVE HEDRICK date 6-14-2000

Existing System Inspection by: ____ date ____

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