IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 222775

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

PIN # 4726-63-8205

APPLICANT: JERRY SOUTHER APPLICANT ADDRESS: 324 SCOTTS CREEK RD. STATESVILLE

SITE ADDRESS: SAME PHONE: 704-872-4411 ALT. PHONE:

SITE DIRECTIONS: WILKSBORO HWY, TL SCOTTS CREEK, ON R

SUBDIVISION: SECTION: LOT # LOT AREA: 1.1 AC DESIGN FLOW: L.T.A.R.:

Septic Tank 1000 (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields # Lines EXISTING Linear Ft:
Trench Width Max. Trench Bottom Depth Gravel Depth

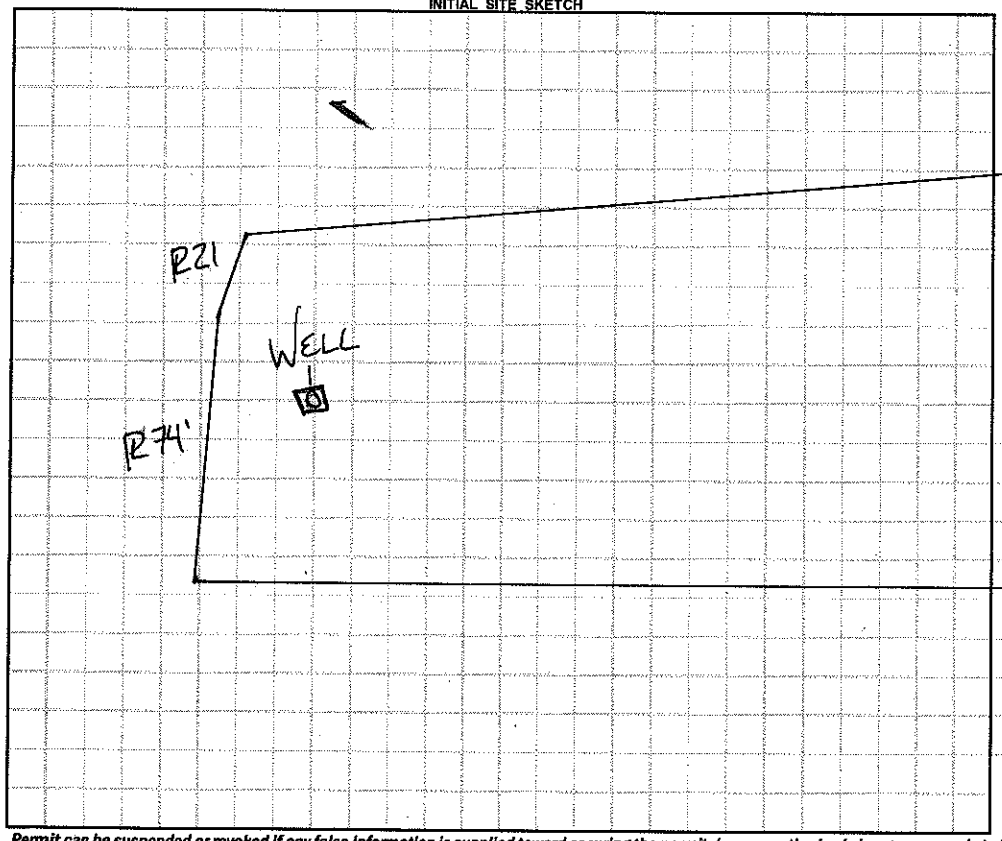
☐ New System ☒ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description:
Repair System Description: TANK
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

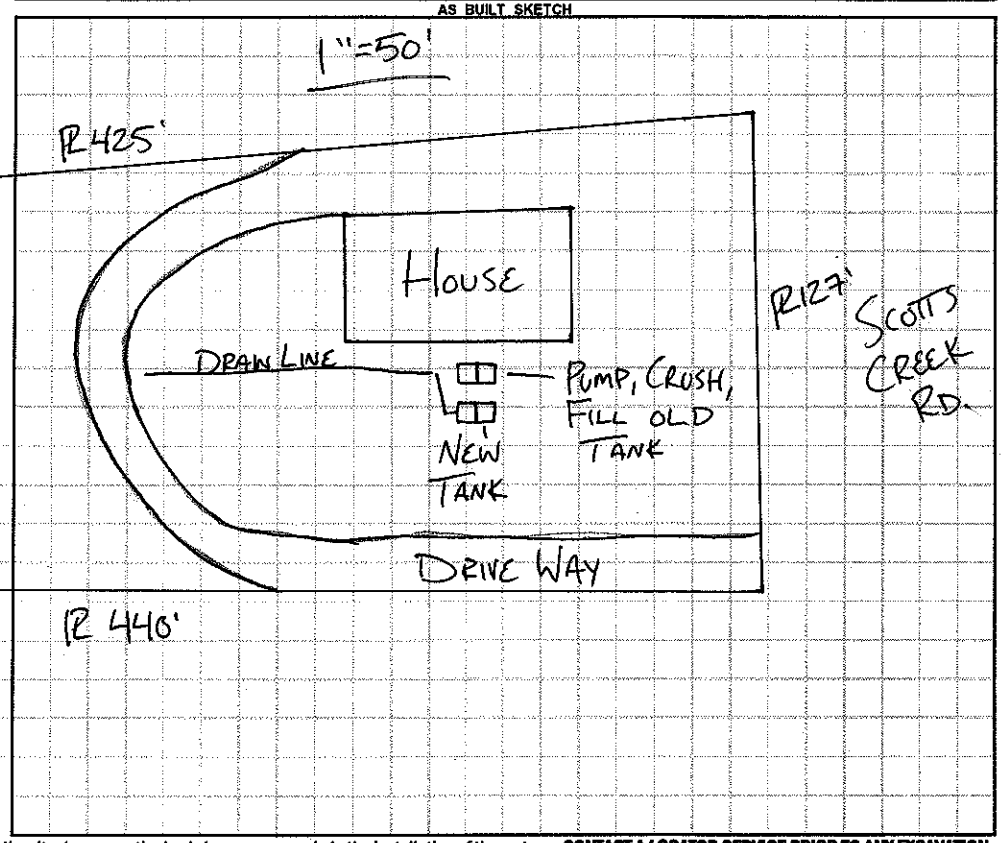
Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions:

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plan valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Jerry Souther Date:

IMPROVEMENT PERMIT by: Date: 10-14-16

AUTHORIZATION TO CONSTRUCT by: Date: 10-14-16

In Installed by: David Yountz

OPERATION PERMIT by: W Sparks Date: 10/26/16

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK