IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 81718 PIN# 4726823288 DATE July 26, 99

OWNER OR CONTRACTOR Samuel Scott PHONE: Business _____ Home _____

ADDRESS 2278 Shipley Ford Rd Statesville NC

LOCATION 115 N ⓛ Scotts Creek ⓡ miller Farm ⓡ Glen Cross Dr Corner of Miller Farm & Glen Cross.

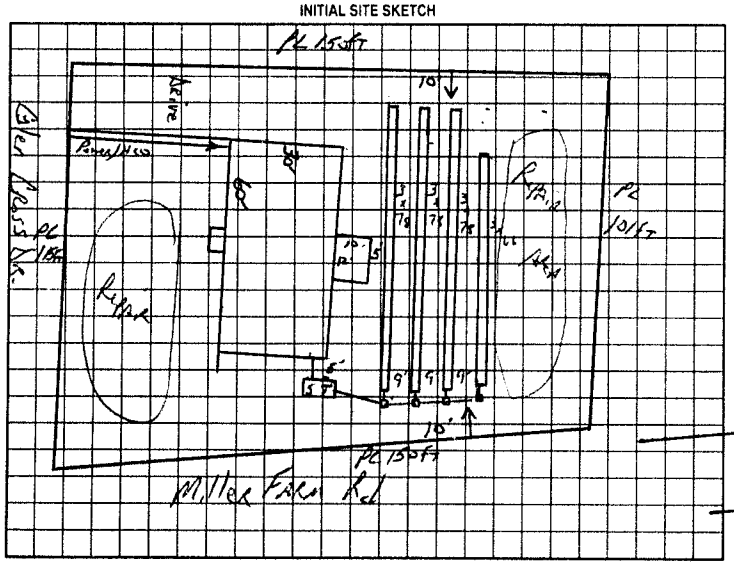
SUBDIVISION Cross Creek BLOCK / SECTION II LOT 36 LOT AREA 16,317 sq ft SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 11-29-99	☒ New System ☐ Repair System Type: I. II ⓘ IV. V. VI	☒ House/Mod. Home	No. Bedrooms 3	Water Supply: ☐ Individual ☒ Public ☐ Community
Pump Tank: _____ Gallons; PT _____ Date _____	System Description: 25% Reduction Gravity	☐ Mobile Home	No. Bathrooms 2	
Pump Make: _____ Model _____ Serial No. _____	Repair System Description: Same Emp - 50% Red. Possible	☐ Business	No. Employees _____	
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300	Maintenance Agreement Required: ☐ Yes ☒ No	☐ Other _____		
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36"	Gravel Depth N/A	☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing		

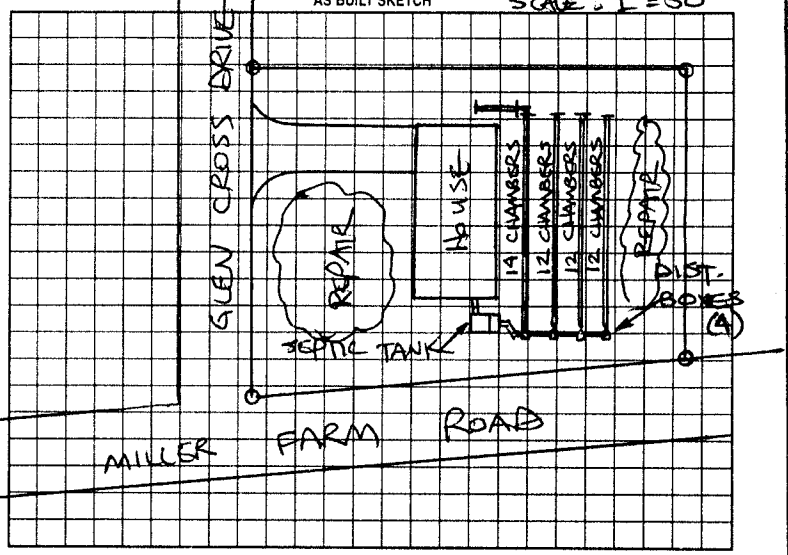
Comments/Conditions: Install 50 Chambers or 30 HDS Sections

Comments/Conditions: ① System installed as shown with prior approval from Health Dept. ② Septic tank w/ risers installed using "Polylok" filter

INITIAL SITE SKETCH



AS BUILT SKETCH SCALE: 1"=50'



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 7-29-99 Installed by: DAVID YOUNTZ

Improvement Permit by: _____ date 7-26-99 Operation Permit by: STEVE HEDRICK date 3-28-00

Authorization to Construct by: _____ date 7-26-99 Existing System Inspection by: _____ date _____

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