IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 91791 PIN# 4726 82 3381 DATE 9-19-00

OWNER OR CONTRACTOR Samuel G. Scott PHONE: Business _____ Home 873 1391

ADDRESS 2278 S Chipley Ford Rd Statesville N.C.

LOCATION 126 Cross Creek Dr. 115N to Scott's Creek Rd TL miller Ford Rd TL Crosscreek at end on Rt

SUBDIVISION Cross Creek BLOCK / SECTION 2 LOT 19 LOT AREA 1.39 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.3 gal/sq ft/day

Septic Tank: 1000 Gallons; STB 1012 Date 11-4-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity Conv.

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No

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

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

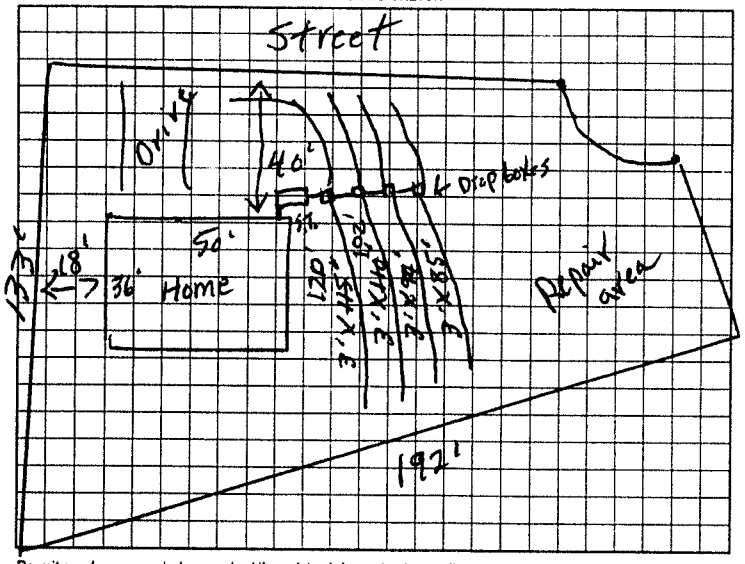
☐ Other _____

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

Comments:/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "PolyLok" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL 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: Samuel A Scott date 10-2-00 Installed by: DAVID YOUNTZ

Improvement Permit by: J.C. moore date 9-19-00 Operation Permit by: STEVE HEDRICK date 2-20-01

Authorization to Construct by: J.C. moore date 9-19-00 Existing System Inspection by: _____ date _____

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