IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 137557 PIN# 4726916881 DATE 12 Sept. 06

OWNER OR APPLICANT William S. Mahaffey PHONE: Business N/A Home (704) 876-1797

ADDRESS 131 Viewmont Court Statesville, N.C.

LOCATION Hwy 115 N to Scotts Creek Rd. Th Ethel Ln. Lot on Corner of Ethel & DJ Dr.

SUBDIVISION WOODROSE BLOCK / SECTION _____ LOT 33 LOT AREA 0.537 ac. SITE CLASS. PS DESIGN FLOW 240 gl/da L.T.A.R. 0.39 lf²/gl/da

Septic Tank: 1000 Gallons; STB _____ Date 6-22-07
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 200
No Lines 4 Trench Width 3' Max Trench Bottom Depth 36" Gravel Depth _____

☐ New System ☑ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 25% Reduction
Repair System Description: 50% Reduction - Pressure
Maintenance Agreement Required: ☐ Yes ☐ ~~No~~

☐ House/Mod. Home No. Bedrooms 2
☐ Mobile Home No. Persons _____
☐ Business No. Employees _____
☐ Other _____

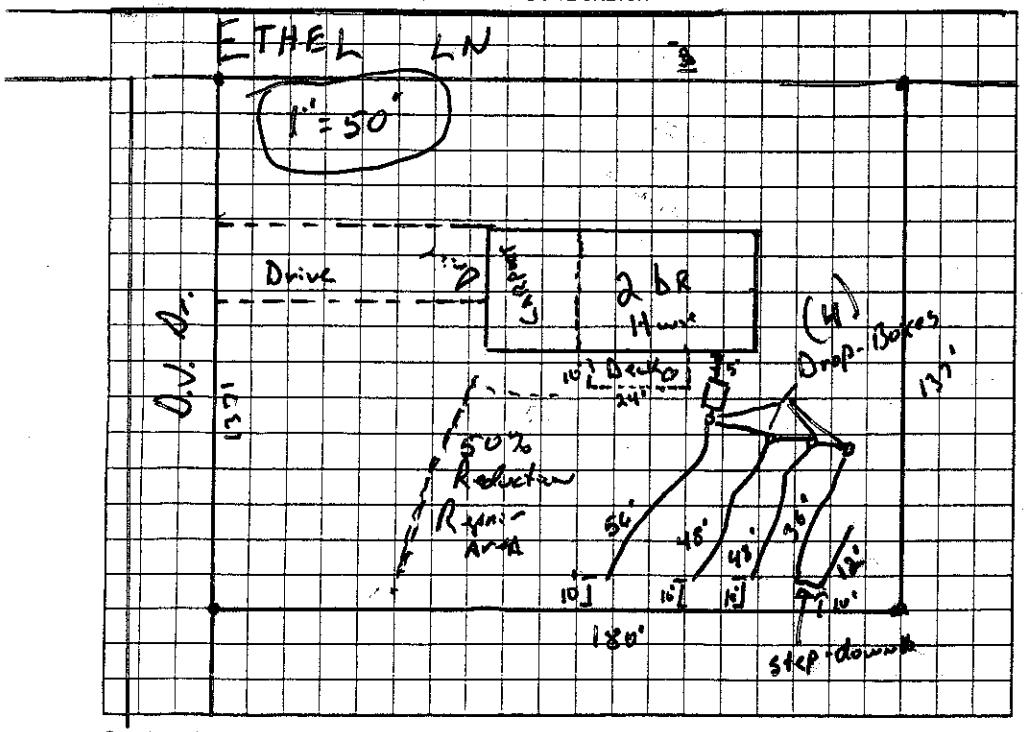
Water Supply: ☐ Individual ☑ Public ☐ Community

☑ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

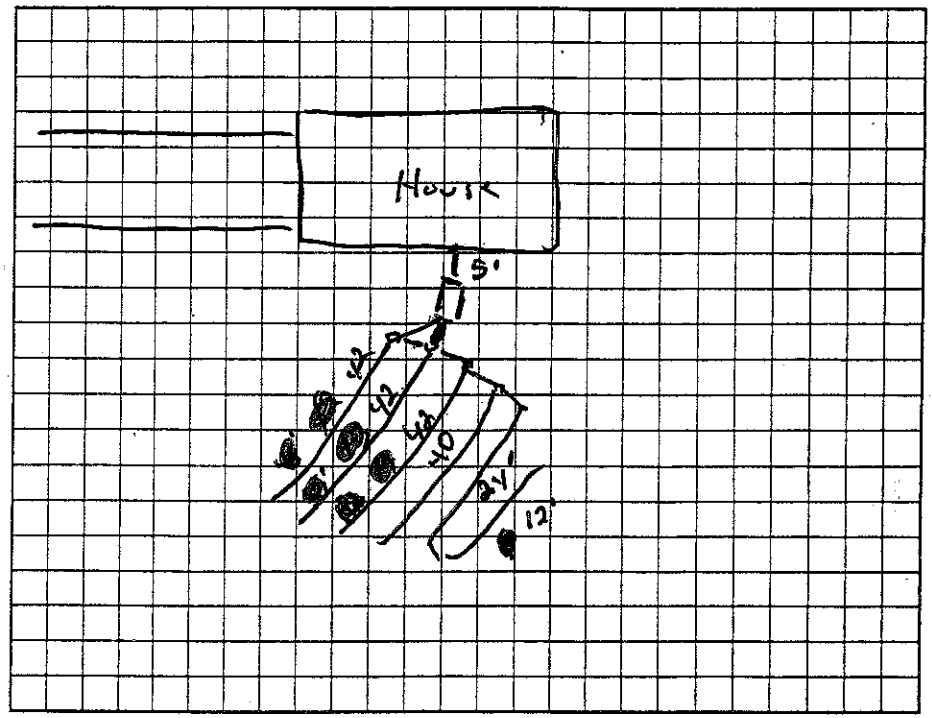
Comments/Conditions: Follow contour
Use 4 drop-boxes

Comments/Conditions: Tank has manhole / Tee installed
20 4" installed.

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: William S. Mahaffey date 9-19-2006

Improvement Permit by: _____, R.S. date 12 Sept. 06

Authorization to Construct by: _____, R.S. date 12 Sept. 06

Installed by: James Huddleston

Operation Permit by: _____, R.S. date 2 Aug. 07

Existing System Inspection by: _____ date _____

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