IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 218392

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

PIN # 4726-92-1032

APPLICANT: Barbara Holland APPLICANT ADDRESS: 109 Friendly Circle Statesville, NC 28625

SITE ADDRESS: 109 Friendly Circle - Statesville, NC 28625 PHONE: 704-871-1224 ALT. PHONE:

SITE DIRECTIONS: 115 N. to Scotts Creek Rd → L on Ethel Lane → R on DS Drive → R on Friendly Circle → First house on Left

SUBDIVISION: Wood Rose Park SECTION: LOT # 70 LOT AREA: 0.647 acres DESIGN FLOW: 360 gal/day L.T.A.R.: Existing

Septic Tank 1000 Existing (gal) STB Date 12-9-1987
Pump Tank — (gal) PT — Date —
Pump Make — Model — Serial # —
Nitrification Fields 1 Ex # Lines 3 Existing Linear Ft: 300 Ex
Trench Width 36" Existing Max. Trench Bottom Depth 36" Existing Gravel Depth ≈ 12" Existing

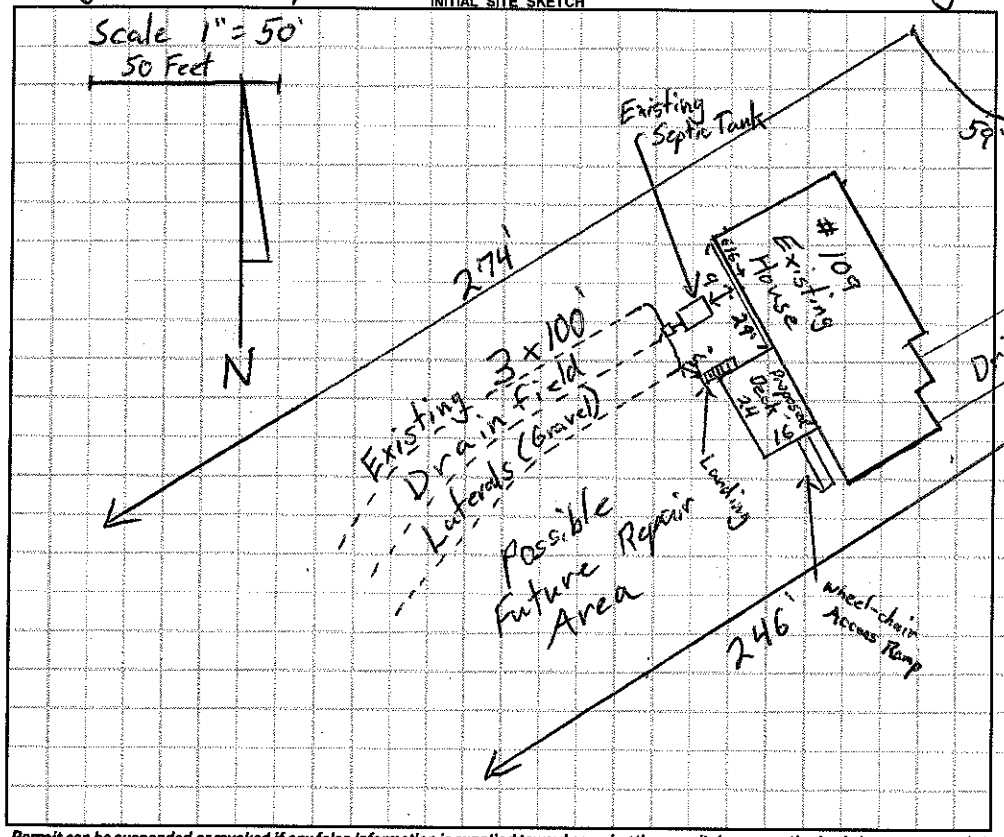
☐ New System ☐ Repair ☐ Expansion System Type: I ☒ II III IV V VI
System Description: Concentional Gravel Existing
Repair System Description: Existing
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

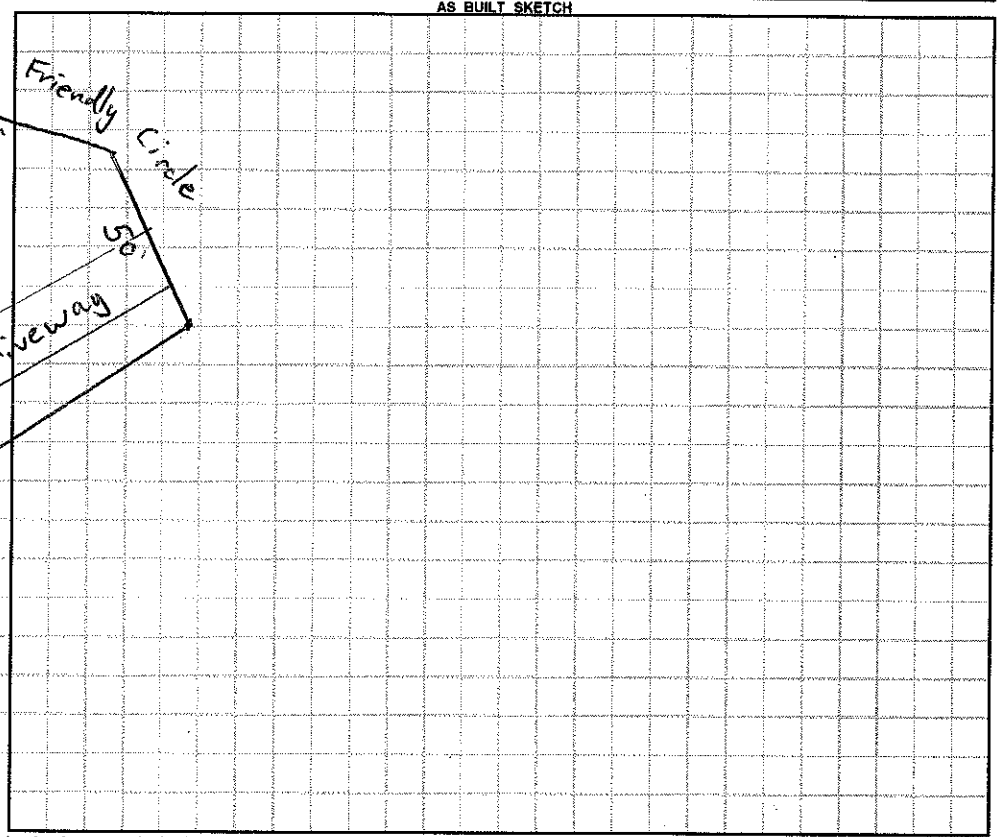
Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Approval is for a 16' x 24' deck (with landing) Existing septic appeared properly functioning @ time of site visit. Landing must not encroach closer than 5' to any sewage system component. Please be aware that the existing system is ≈ 29 years old. It is recommended that you pump your septic tank every 3-5 years to assist with the continued functionality of your septic system.

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 plat 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: Stephen R. Holland Date: 6/10/16 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: S Romas Rhuck Date: 6-8-2016

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