IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 179018

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

PIN # 4728000362

APPLICANT: Kenneth Byers APPLICANT ADDRESS: 439 Cove Gap. Rd.

SITE ADDRESS: 439 Cove Gap Rd. PHONE: 704-746-7083 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 115N TL Midway Rd. TR Cove Gap Rd.

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.5 acres DESIGN FLOW: 360 gpd L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB 160 Date 4-19-13
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 5 Linear Ft: 300
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

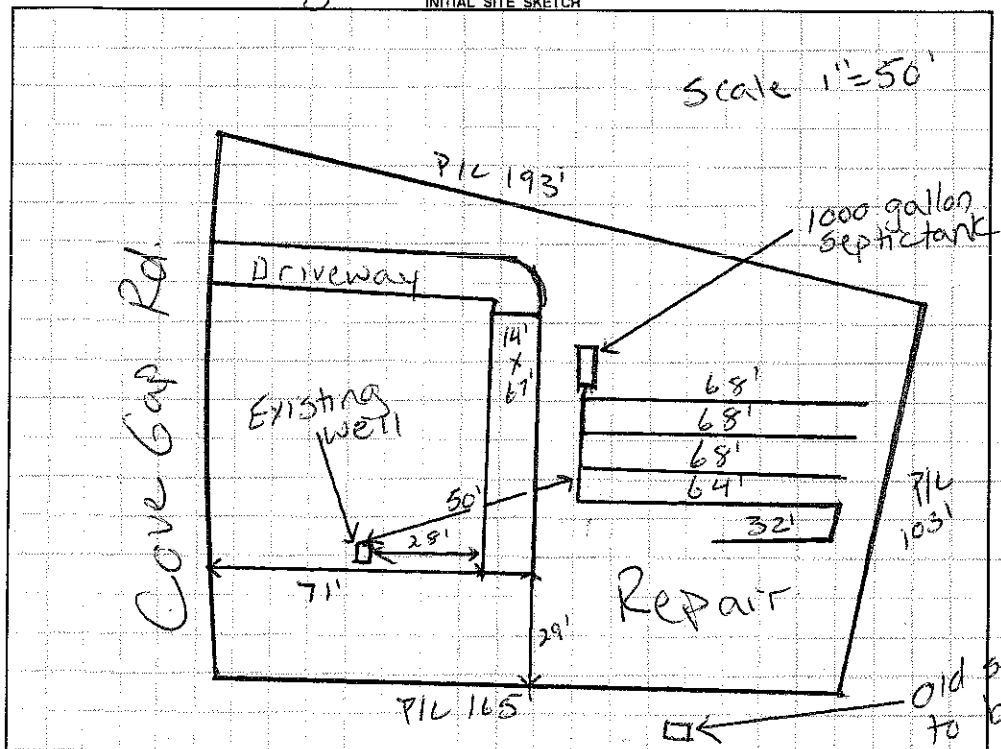
☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: 25% Reduction
Repair System Description: 50% Reduction
Maintenance Agreement Required: ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

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

Water Supply
☑ Private
☐ Public
☐ Community

Comments / Conditions: Install a 25% Reduction system on contour with serial distribution. Do NOT Grade for house site. Existing well must only serve one single family residence.

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: KENNETH BYERS Date: 6-24-13 Installed by: Welborn Grading

IMPROVEMENT PERMIT by: Justin Henderson Date: 6-17-13 OPERATION PERMIT by: James Date: 7-2-13

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 6-18-13 Existing System Inspected by: Date:

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