IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112096 PIN# 4728-06-3708 DATE 4-26-03

OWNER OR CONTRACTOR JANICE SWICEGOOD PHONE: Business 704 902-1479 Home 704-872-9920

ADDRESS 270 ELMWOOD ROAD, STATESVILLE, NC 28625

LOCATION NC 115 NORTH, TL PISGAH ROAD, TR BARRINGER DRIVE, 3RD LOT ON LEFT

SUBDIVISION BARRINGTON EST BLOCK / SECTION ____ LOT 3 LOT AREA 2.078 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 312 Date 6-16-03
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

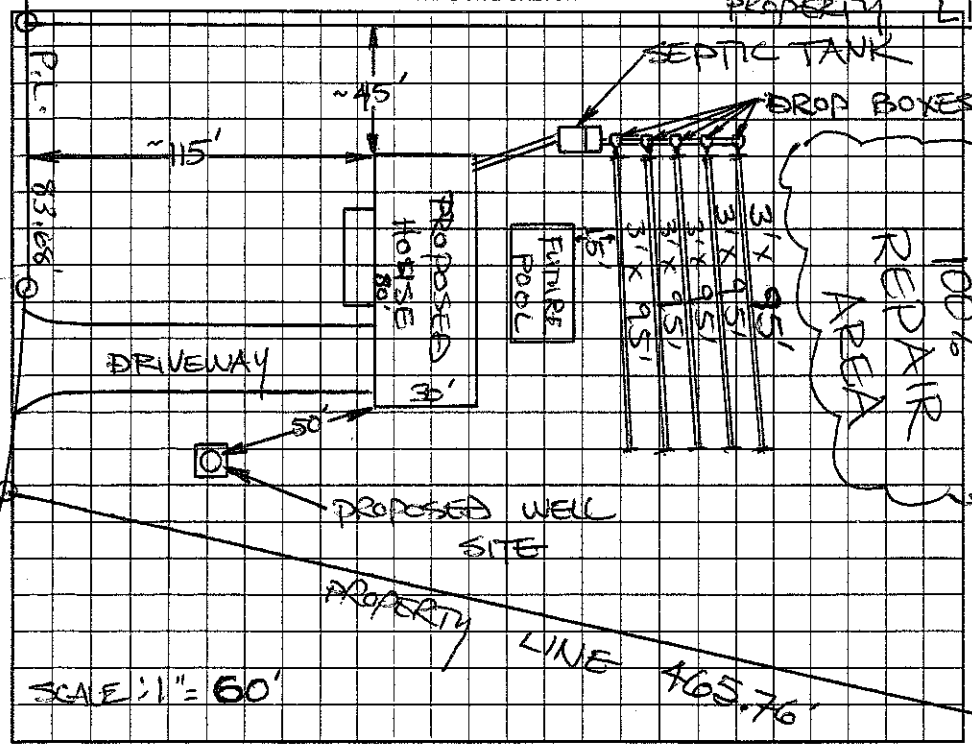
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

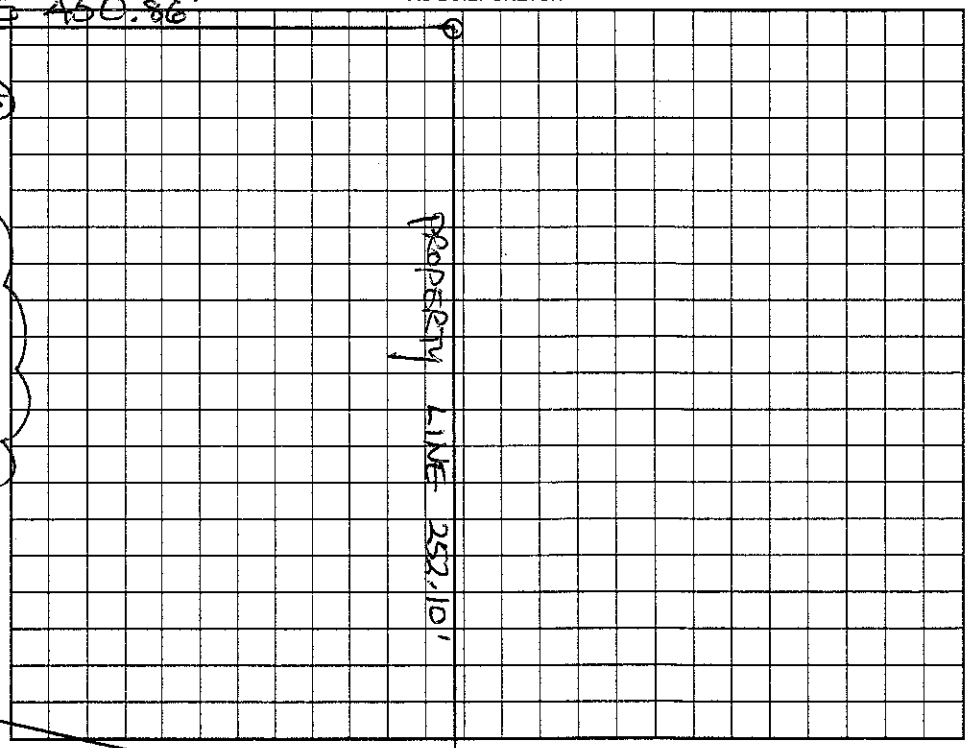
Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL, 15' FROM POOL

Comments:/Conditions: ZABEL FILTER & MARKER INSTALLED AS DRAWN

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: Brenda Munday date 4-28-03 Installed by: MARTY TUCKER

Improvement Permit by: STEVE HEDRICK date 4-26-03 Operation Permit by: [signature] date 7/8/03

Authorization to Construct by: STEVE HEDRICK date 4-26-03 Existing System Inspection by: ____ date ____

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