ERIC + Michelle Dagenhart

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 104779 PIN# 4728 07 2240 DATE 2-26-02

OWNER OR CONTRACTOR MARK LITTLE PHONE: Business 704-437-0447 Home 704-876-0266

ADDRESS 674 DOBSON FARM ROAD, STATESVILLE, NC 28625

LOCATION NC 115 N, TL PISGAH ROAD, TR BARRINGTON DRIVE, 5TH LOT ON LEFT

SUBDIVISION BARRINGTON BLOCK / SECTION ____ LOT 5 LOT AREA 2.062 ACRES SITE CLASS. BS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 5-26-02
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines SIX Trench Width 36" Max Trench Bottom Depth 36

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
Gravel Depth 12" ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

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

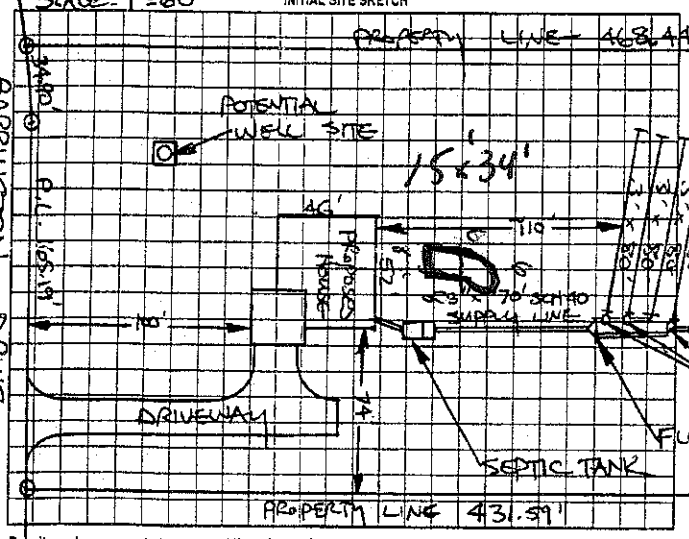
Water Supply: ☐ Individual ☐ Public ☐ Community WELL

Comments/Conditions: ① KEEP SYSTEM MINIMUM 100 FEET FROM WELL ② CONTACT HEALTH DEPT. AFTER CLEARING & PRIOR TO INSTALLATION TO FLAG OUT SYSTEM

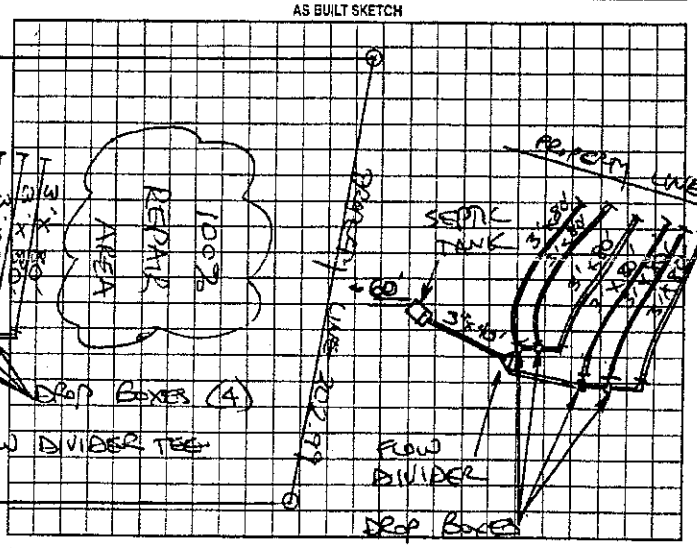
Comments/Conditions: ① SYSTEM ALTERED AS SHOWN WITH PRIOR HEALTH DEPT. APPROVAL ② SEPTIC TANK WITH MARKER INSTALLED USING "Polylok" FILTER

SCALE: 1"=60

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: [signature] date 2-26-02 Installed by: STEVE JORDAN

Improvement Permit by: STEVE HEDRICK date 2-26-02 Operation Permit by: STEVE HEDRICK date 8-15-02

Authorization to Construct by: STEVE HEDRICK date 2-26-02 Existing System Inspection by: ____ date ____

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

IREDELL COUNTY HEALTH DEPT.
ENVIRONMENTAL DIVISION
318 TURNERSBURG HIGHWAY
STATESVILLE, NC 28625
COURIER 09-36-07

Eric
704-876-2422
after 8:00 o'clock

Location of the proposed pool addition does not appear to impact the existing on-site septic system.**NOTE:

[signature] REHS

Date: July 15, 2011

ICHD-Environmental Health Division