IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 084454 PIN# 4728 13 1231 DATE 11-10-99

OWNER OR CONTRACTOR CARLA STOVER PHONE: Business Home 873-3390

ADDRESS 201 ANTLER DRIVE STATESVILLE NC 28625

LOCATION NC 115 N, TL ASGAH RD, TL TREEBARK ROAD, 0.5 MI, ON LEFT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 11.9 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.250PD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 12-5-99
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 30" 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

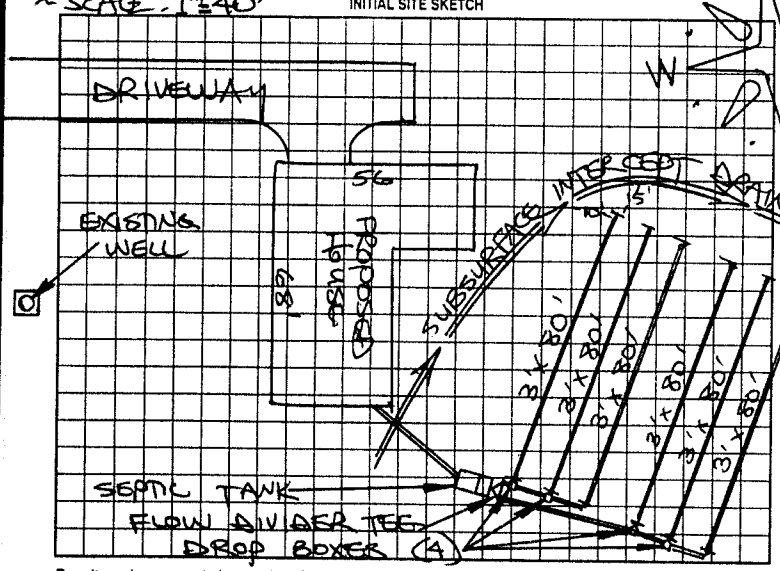
Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments/Conditions: INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH BEGINNING 42" DEEP N OUT TO DAYLIGHT

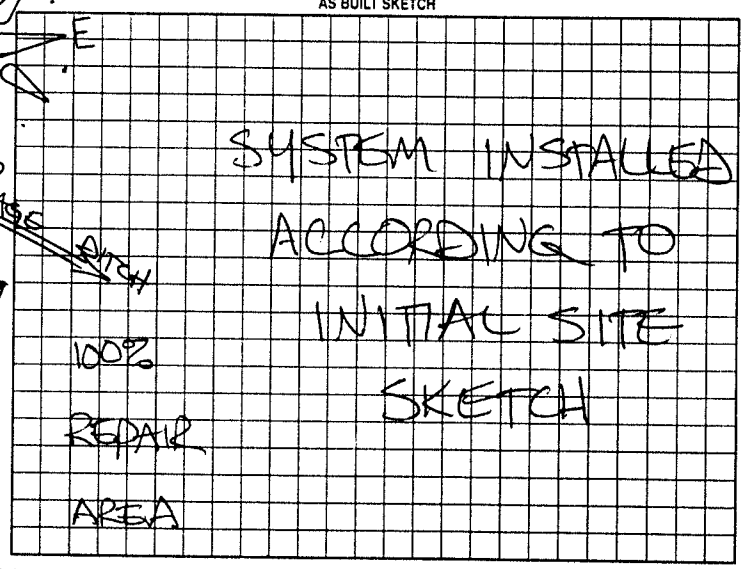
Comments/Conditions: SEPTIC TANK W/RISERS INSTALLED USING "POLYLOK" FILTER

~ SCALE: 1"=40'

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 11-10-99 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 11-10-99 Operation Permit by: STEVE HEDRICK date 3-30-00

Authorization to Construct by: STEVE HEDRICK date 11-10-99 Existing System Inspection by: date

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