IREDELL COUNTY HEALTH DEPARTMENT

~~Statesville Office (704) 878-6305~~ Mooresville Office (704) 660-3625 PERMIT # 20/223

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

PIN # 4728237143

APPLICANT: Richard Martin APPLICANT ADDRESS: 3321 Wilkesboro Hwy Statesville NC 28625

SITE ADDRESS: 3321 Wilkesboro Hwy Statesville NC 28625 PHONE: 704-876-0130 ALT. PHONE: 704-902-7748

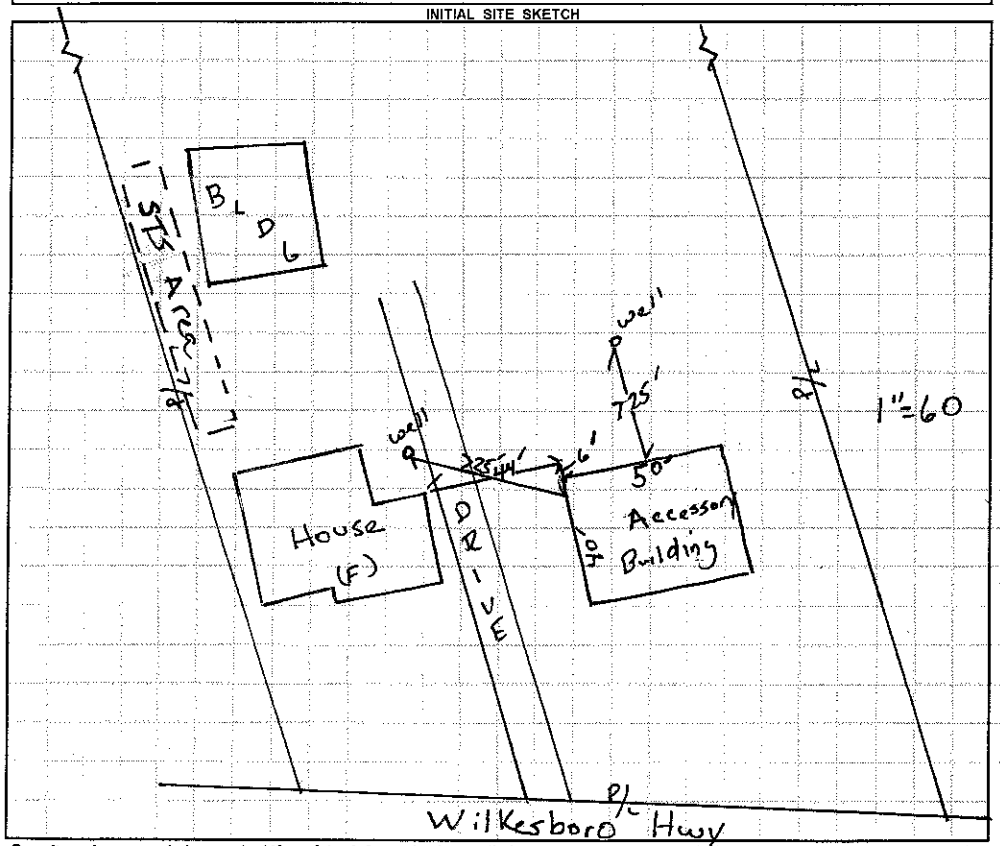
SITE DIRECTIONS: 115 N 6 miles past interstate 40 house on left

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 1.83 DESIGN FLOW: N/A L.T.A.R.: N/A

Septic Tank	Existing	(gal)	STB	Existing	Date	Existing	☐ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☐ Residence	No. Bedrooms		Water Supply
Pump Tank	N/A	(gal)	PT	N/A	Date	N/A	System Description:	N/A	☐ Business	No. Persons		☒ Private
Pump Make	Existing	Model		N/A	Serial #	N/A	Repair System Description:	N/A	☐ Other	No. Employees		☐ Public
# Nitrification Fields	EX	# Lines		EX	Linear Ft:	EX	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	Existing	Max. Trench Bottom Depth		Existing	Gravel Depth	Existing	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: All building foundations must be 55' From STS area and 325' From any well.

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: Richard C Martin Date: 2-4-14 Installed by:

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

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: Date: 02/03/14

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