IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 205926

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

PIN # 4728242899

APPLICANT: Ron Lindsey APPLICANT ADDRESS: 3403 Wilkesboro Hwy Statesville NC

SITE ADDRESS: 3403 Wilkesboro Hwy Statesville NC PHONE: 704-880-5863 ALT. PHONE: N/A

SITE DIRECTIONS: 115 N Property on left

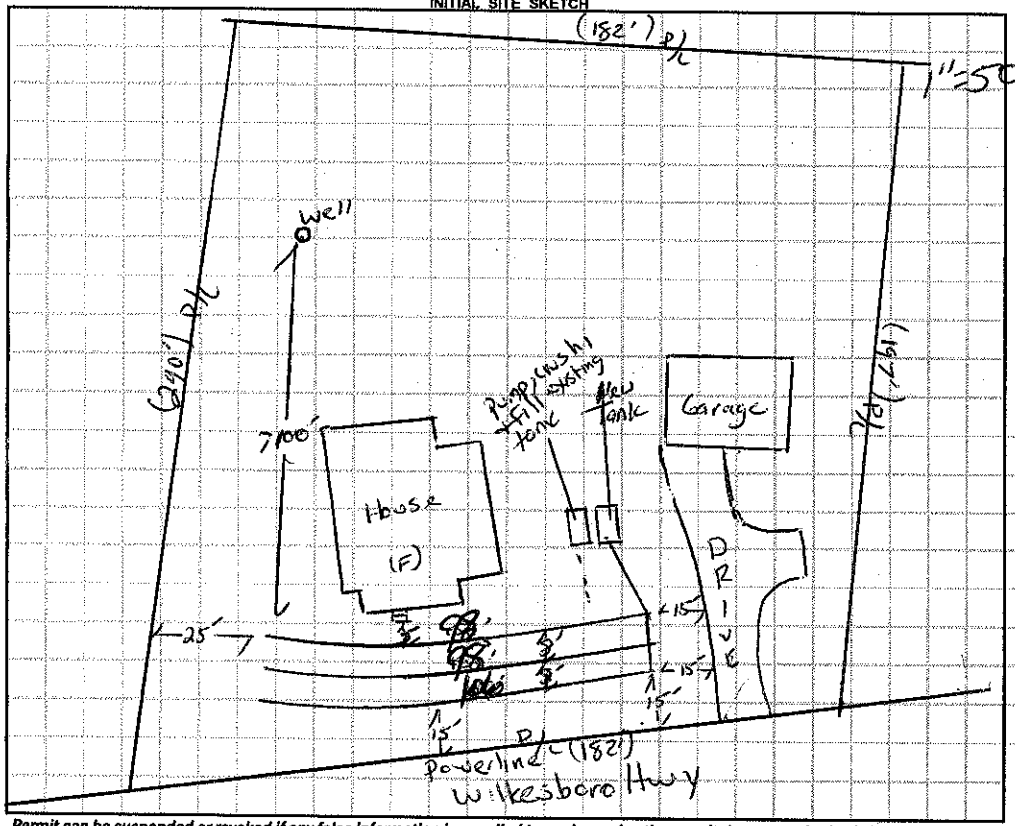
SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.84ac DESIGN FLOW: 360 L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	160	Date	7-14-14	☐ New System	☒ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank	N/A	(gal)	PT	N/A	Date	N/A	System Description:	25% Reduction			
Pump Make	N/A	Model	Poly/Olc		Serial #	PL-68	Repair System Description:				
# Nitrification Fields	1	# Lines	3		Linear Ft:	300	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"	Max. Trench Bottom Depth	36"		Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE		

☒ Residence	No. Bedrooms	3	Water Supply
☐ Business	No. Persons	6	☒ Private
☐ Other	No. Employees		☐ Public
☐ Slab	☐ Crawl Space		☐ Community
☒ Basement w/plumbing	☐ Basement w/o plumbing		

Comments / Conditions: Install 25% reduction on contour with serial distribution. Pump, crush + fill existing tank. If existing line is crossed dam between new lines.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed Quick as drawn

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: Ron Lindsey Date: 10-7-14 Installed by: K+M Grading

IMPROVEMENT PERMIT by: David Flynn Date: 10/07/14 OPERATION PERMIT by: David Flynn Date:

AUTHORIZATION TO CONSTRUCT by: David Flynn Date: 10/07/14 Existing System Inspected by: Date:

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