IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4731-39-3495 DATE 1-5-06

OWNER OR CONTRACTOR STEVE PATRICK PHONE: Business 704-200-8594 Home 704-528-3042

ADDRESS 106 PARKWOOD LANE, STATESVILLE, NC 28677

LOCATION OLD MOUNTAIN ROAD TO E. MONBO ROAD, TR PARKWOOD LANE, 1ST HOUSE ON RIGHT

SUBDIVISION PARKWOOK ACRES BLOCK / SECTION ____ LOT 22 LOT AREA ~ 1 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 gpd/ft²

Septic Tank: EXISTING Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 480 Linear Feet 160

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

~~New System~~ ☒ Repair System Type: I, (II), III, IV, V, VI

System Description: ____

Repair System Description: 25% REDUCTION SYSTEM

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

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

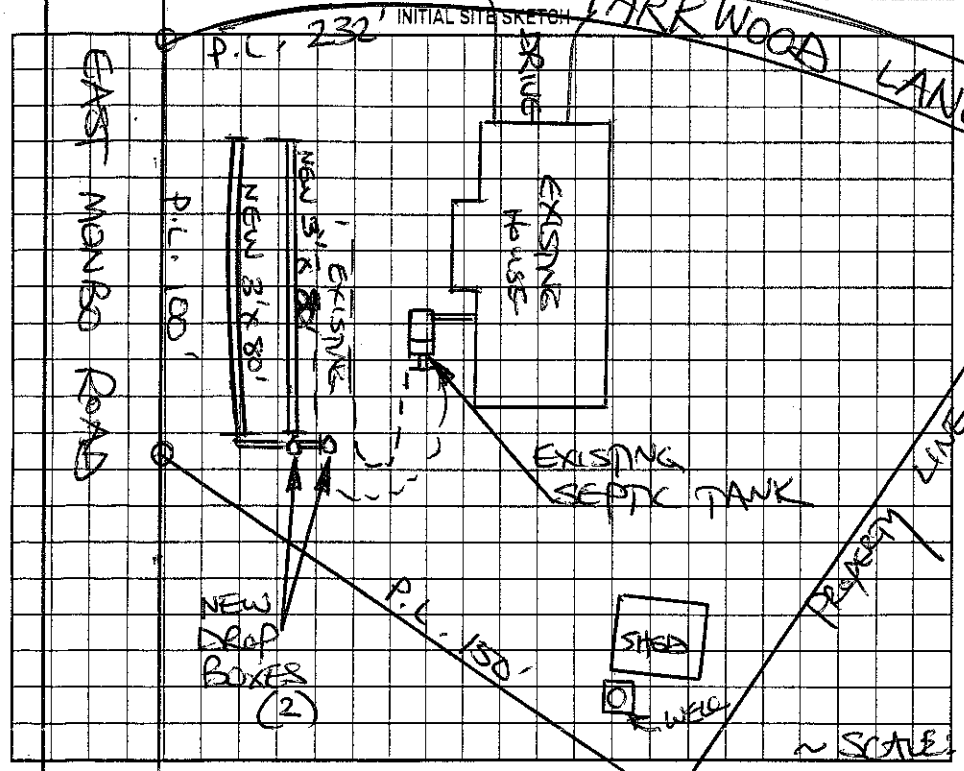
Water Supply: ☑ Individual ☐ Public ☐ Community

WELL

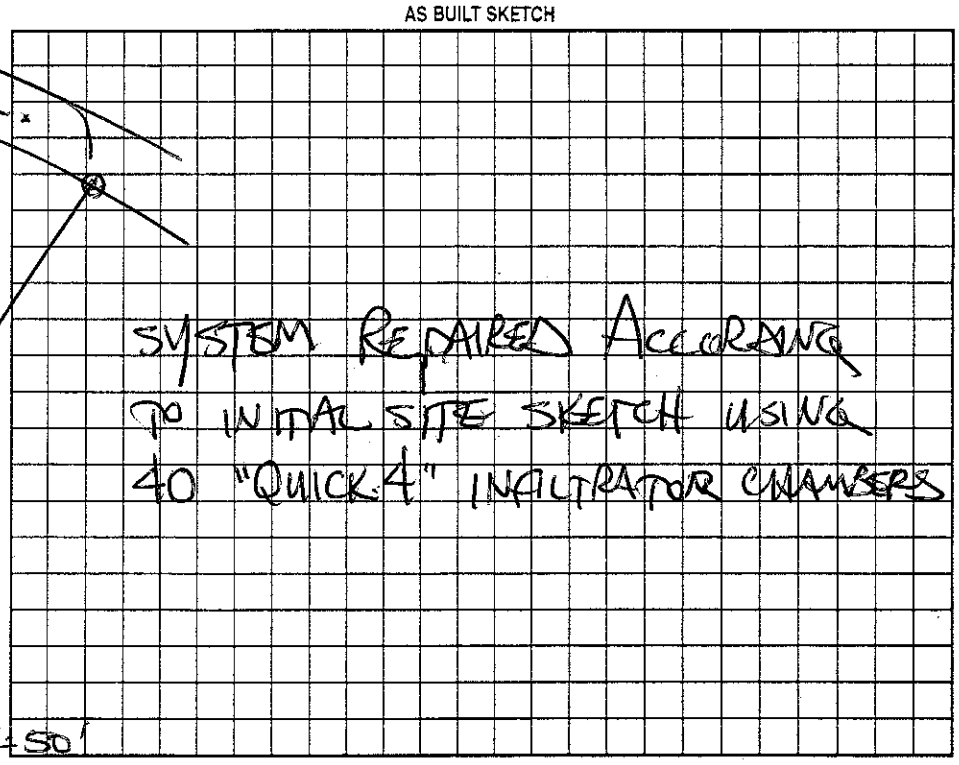
Comments:/Conditions: ① INSTALL TWO NEW 3'x80' DRAINLINES USING 25% REDUCTION SYSTEM ② REPLACE SANITARY TEE IF NECESSARY

Comments:/Conditions:

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: Steve Patrick date 1-5-06 Installed by: WAYNE CLONTZ

Improvement Permit by: STEVE HEDRICK date 1-5-06 Operation Permit by: STEVE HEDRICK date 1-6-06

Authorization to Construct by: STEVE HEDRICK date 1-5-06 Existing System Inspection by: ____ date ____

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