This Permit Voids All Previous Permits

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 80659 PIN# 4733101395 DATE July 15, 99

OWNER OR CONTRACTOR Janice Smith PHONE: Business _____ Home 7045785495

ADDRESS 1217 Ascending Lane, Statesville NC

LOCATION I-40 W To Old NT Rd (L) To Wallace Spring (L) To Westfield Dr (L) Lot is Corner of Westfield & Southview. Left for Southview

SUBDIVISION Southview Est BLOCK / SECTION _____ LOT 25 LOT AREA 1 Ac SITE CLASS. 5 DESIGN FLOW 450 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 794 Date 8 21 99
Pump Tank: 1250 Gallons: PT 28 Date 9-9-99
Pump Make: SHEF50A1 Model Hydromatic Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 530
No Lines 5@106 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I II III IV V VI
System Description: Pump Conv Gravity
Repair System Description: Pump 25 50% Reduction
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Bathrooms 2 No. Employees _____

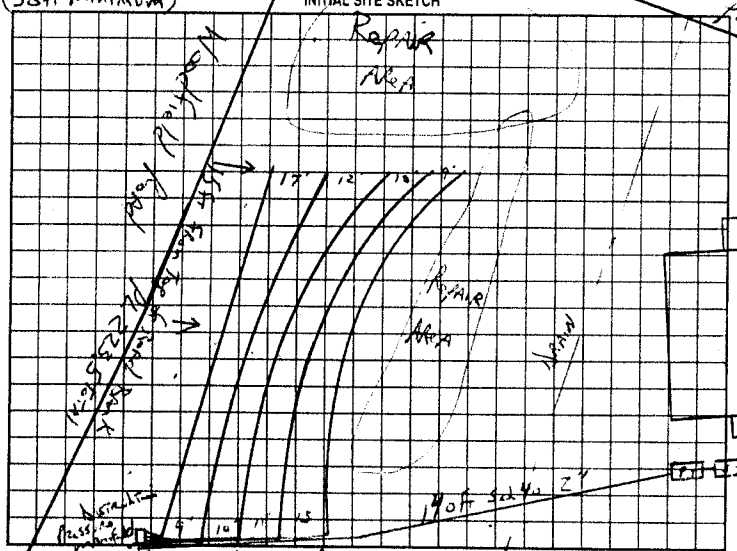
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community
WELL

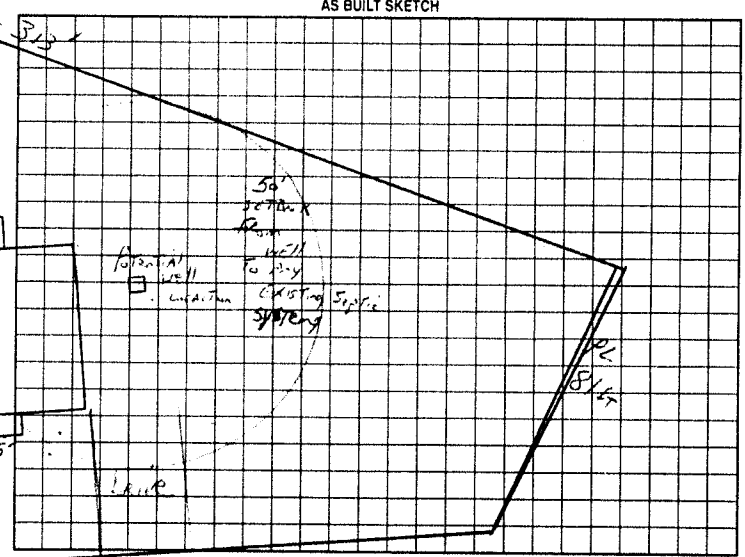
Comments/Conditions:
WELL LOCATION MUST Be 50ft From Any Septic System. (50ft Minimum)
INSTALL Lines on Contour
Keep 15 Ft From Any ER
SEE Attachment for

Comments/Conditions:
7-30 Checked lines, man. folded
Road Bank CUT 10-22 Tanks & Supply Line inspected
Pump Signing 11-30 Pressure Set / Alarm checked
12-20 RENA 4 Top checked & OK

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: Janice D Smith date 7-16-99

Improvement Permit by: L Potter date 7 15 99

Authorization to Construct by: L Potter date 7 15 99

Installed by: James Hudler

Operation Permit by: L Potter date Dec 20, 99

Existing System Inspection by: _____ date _____

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