* THIS PERMIT VOIDS PREVIOUS ISSUED 11/16/01

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C) MOORESVILLE 704-664-5281

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

PERMIT# 089174 PIN# 4733-90-5003 DATE 07/11/02

OWNER OR CONTRACTOR Steve Hilkert PHONE: Business 528-1234 Home

ADDRESS 146 Carriage Rd., Statesville 28677

LOCATION HWY 21 S, (TL) Moose Club, (TL) Skyuka, (TR) Arlie, to Apple Valley (Same road, Arlie splits to right) lot on left

SUBDIVISION Meadow Pines BLOCK / SECTION LOT 7 LOT AREA 0.59 Acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30

Septic Tank: 1,000 Gallons; ST8 1012 Date 02/11/02
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

X New System ☐ Repair System Type: I. II. (III) IV. V. VI
System Description: 25% Reduction, Gravity
Repair System Description: 50% Reduction, Gravity, LP
Maintenance Agreement Required: ☐ Yes X No
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

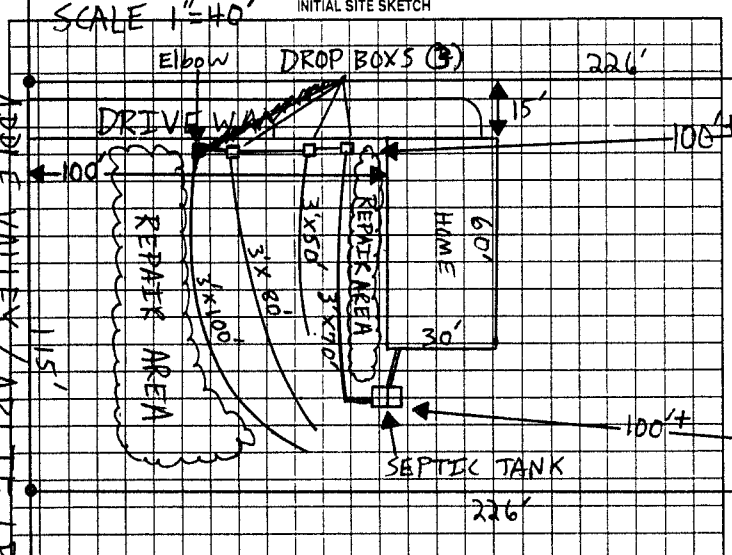
X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other

Water Supply:
X Individual
☐ Public
☐ Community
WELL

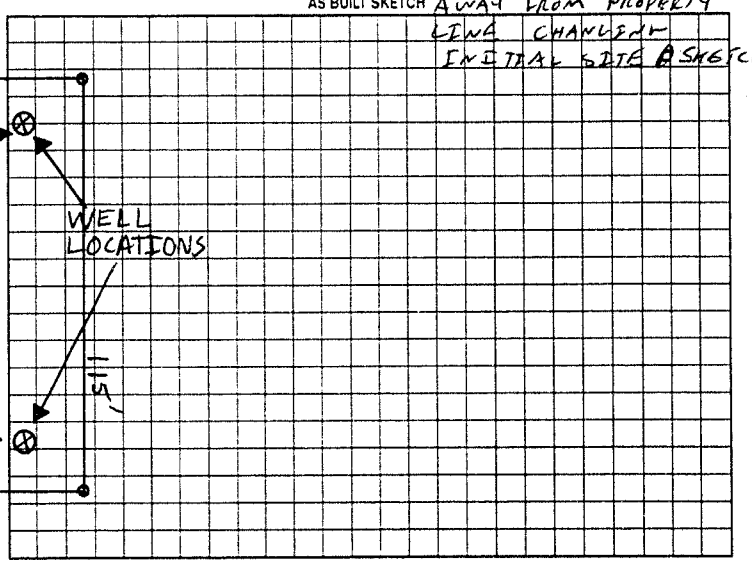
Comments/Conditions: (1) Make sure well is put as far as possible from septic system, 100 feet plus. (15A NCAC 18A .1956 (6)(9))

Comments/Conditions
(2) SEPTIC TANK installed with marker and poly lock filter.
(3) House moved 5' closer to road changing initial drawing. (4) DRIVE moved ~~CLOSER~~ AWAY FROM PROPERTY LINE CHANGING INITIAL SITE SKETCH.

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: date

Improvement Permit by: date

Authorization to Construct by: date

Installed by: Craig Thompson Grading

Operation Permit by: C. [illegible] RS date 7/12/02

Existing System Inspection by: date

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