# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (1) MOORESVILLE 704-664-5281

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

PERMIT# 133867 PIN# 4736-30-4178 DATE 3-1-06

OWNER OR APPLICANT KW NICHOLSON Construction INC PHONE: Business 704-878-2517 Home 704-902-0799

ADDRESS 930 Arbelle Ct Statesville NC 28677

LOCATION 115 N (R) Sullivan Farm (R) Meadow Oaks Lot on Rt

SUBDIVISION Meadow Oaks BLOCK / SECTION ____ LOT 18 LOT AREA .69 AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; ST# 1012 Date 4-30-06

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EB=1600 Linear Feet 400'

No Lines 7 Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: 6 Bdrm 2500 Reduction Flow

Repair System Description: LP 50'/1 Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons 8 No. Employees ____

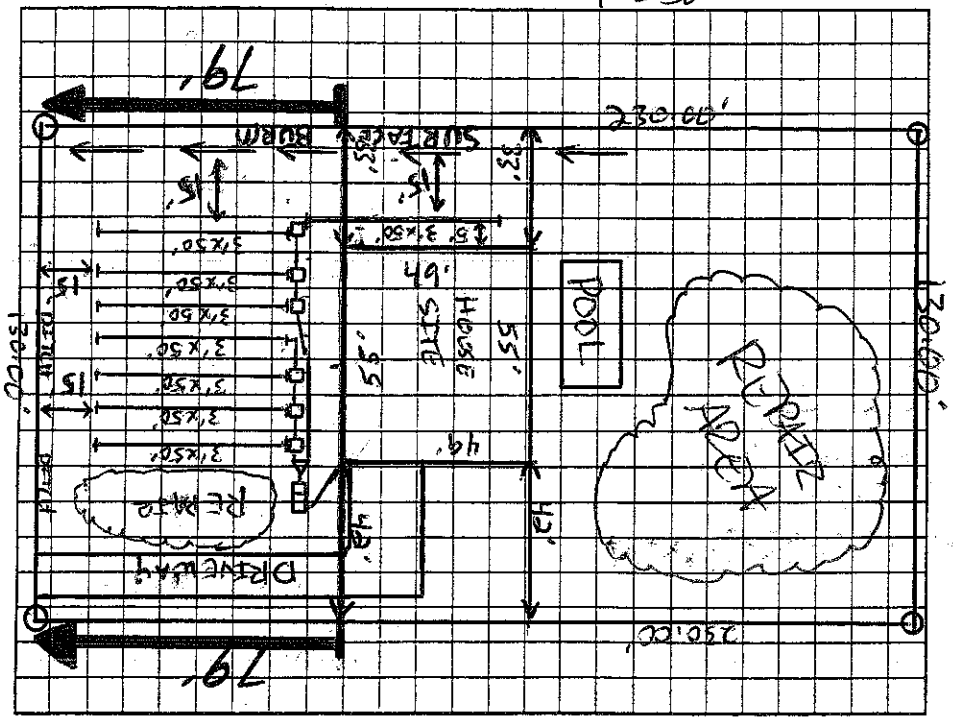
Water Supply: ☐ Individual ☒ Public ☐ Community

Gravel Depth N/A ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: (1) House site slid back 5' from original staking. (2) Install B/50' lines/with 1 flow divider tee & drop boxes (3) Stay 15' off ditch. System is extremely tight on space

Comments:/Conditions: (4) System is staked out completely (5) Last line has to be 15' from water drainage from surface room.

INITIAL SITE SKETCH 1" = 50'




AS BUILT SKETCH

Yellow TF-tile filter ST mark

Meadow Oaks Drive

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: [signature] date 3-2-06 Installed by: Adam Yountz Grading

Improvement Permit by: [signature] date 3-1-06 Operation Permit by: [signature] date 7-27-06

Authorization to Construct by: [signature] date 3-1-06 Existing System Inspection by: ____ date ____

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