IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 216797

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

PIN # 4736504634

APPLICANT: Ryan Dellinger APPLICANT ADDRESS: 119 Dobbs Dr Statesville NC

SITE ADDRESS: 119 Dobbs Dr Statesville NC PHONE: 704-880-1440 ALT. PHONE: 704-880-7861

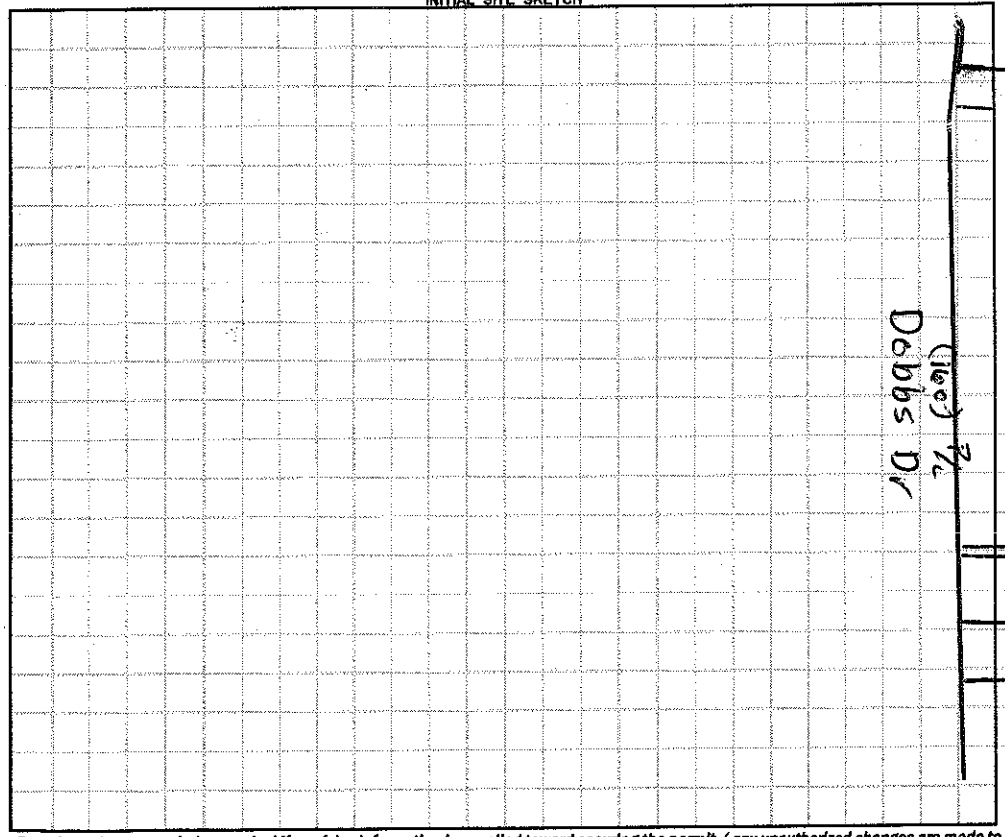
SITE DIRECTIONS: 115 N T/L Chipley Ford Rd T/L Fort Dobbs Rd T/L Dobbs Dr Lot on left

SUBDIVISION: Fort Dobbs Farms SECTION: N/A LOT # 10 LOT AREA: 0.88ac DESIGN FLOW: Ey L.T.A.R.: Ey

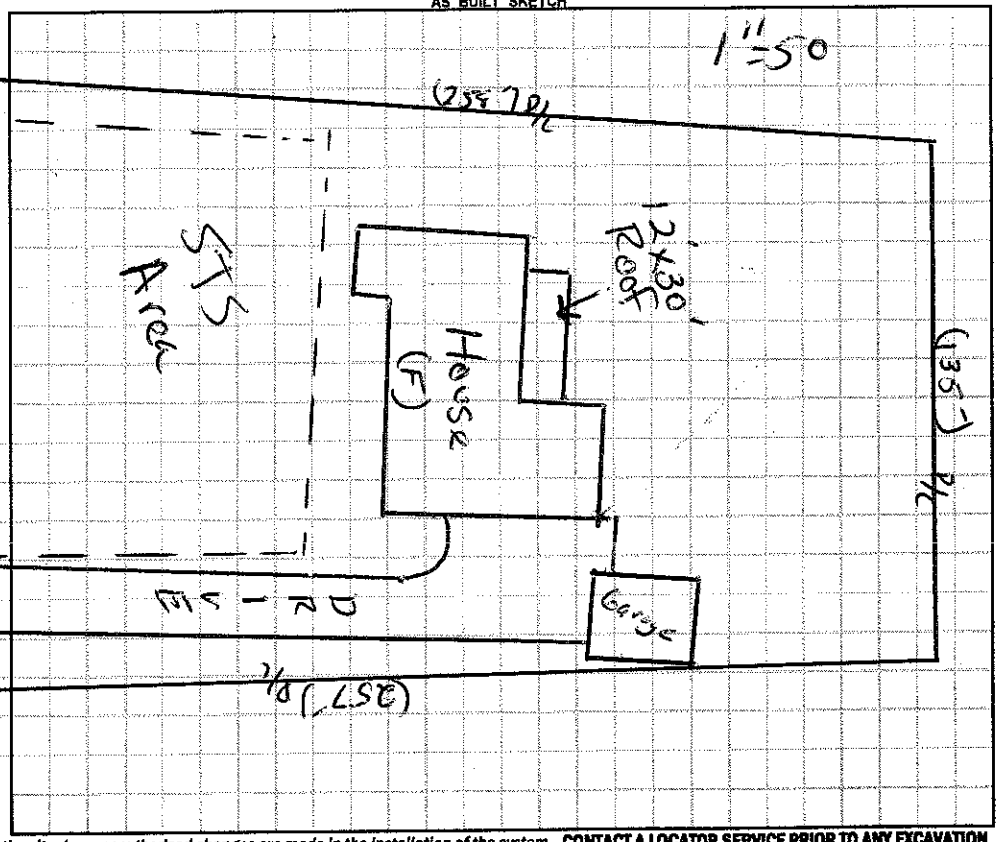
Septic Tank	Ey (gal)	STB	Date	☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI	☒ Residence	No. Bedrooms	Ey	Water Supply	
Pump Tank	(gal)	PT	Date	System Description: Existing	☐ Business	No. Persons	Ey	☐ Private	
Pump Make	Model		Serial #	Repair System Description:	☐ Other	No. Employees		☒ Public	
# Nitrification Fields	Ey # Lines	Ey	Linear Ft: Ey	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	Ey Max. Trench Bottom Depth	Ey	Gravel Depth Ey	☒ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing			☐ Basement w/o plumbing	

Comments / Conditions: All building foundations must be 35 from any part of STS

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. **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: [signature] Date: 3-18-16 Installed by:

IMPROVEMENT PERMIT by: Date: OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Date: Existing System Inspected by: [signature] Date: 03/18/16

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