IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 207564

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

PIN # 4737773149

APPLICANT: Charles W. Massie APPLICANT ADDRESS: 4622 Sunrise Beach Rd Catawba NC 28609

SITE ADDRESS: 385 Bluegill Ln Statesville NC 28625 PHONE: 865-776-7146 ALT. PHONE: N/A

SITE DIRECTIONS: N to Cripley Ford Rd T/R Bluegill Ln on left at end in cul-de-sac

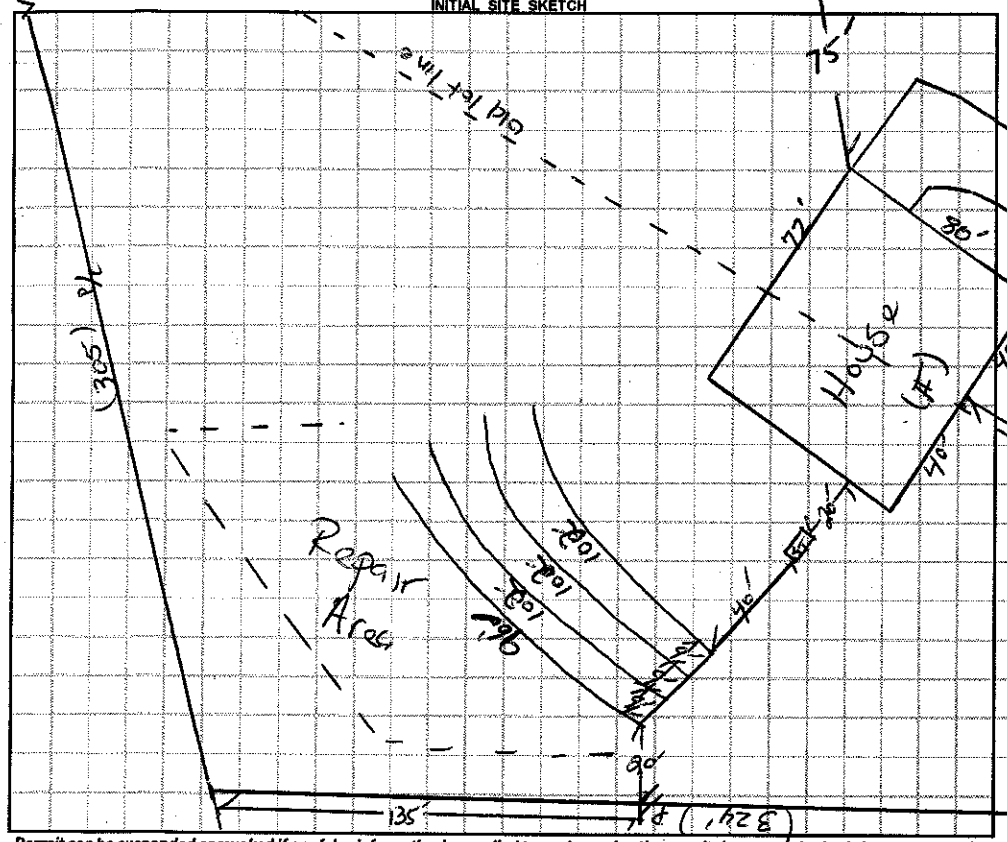
SUBDIVISION: Poplar Ridge SECTION: P2 LOT # 28 LOT AREA: 3.117ac DESIGN FLOW: 480 L.T.A.R.: 0.3

Septic Tank	1000 (gal)	STB	760	Date	7-12	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4
Pump Tank	(gal)	PT		Date		System Description:	25% Reduction			☐ Business	No. Persons 8
Pump Make		Model		Serial #		Repair System Description:	25% Reduction			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft:	400	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE			☐ Basement w/plumbing	☐ Basement w/o plumbing

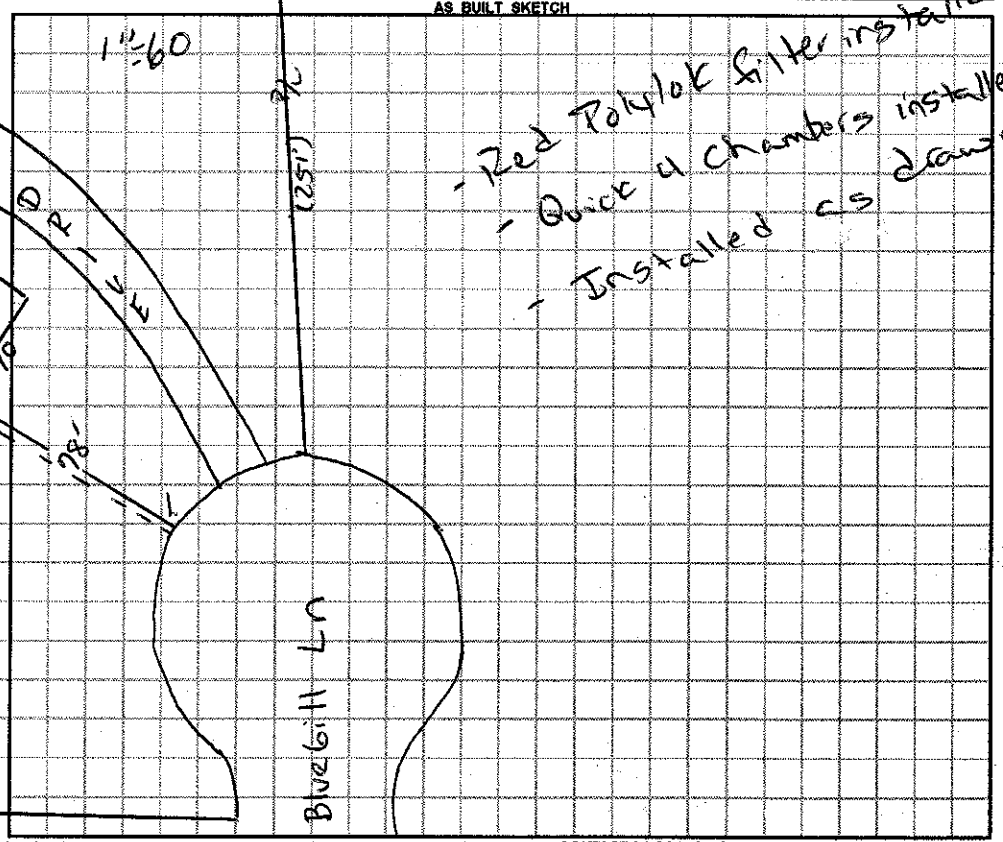
Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: Install 25% reduction on contour with serial distribution.

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: 1/16/15 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: [signature] Date: 01/07/15 OPERATION PERMIT by: [signature] Date: 10-20-15

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 02/02/15 Existing System Inspected by: Date:

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