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IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 2-15-00

PERMIT# 087339 PIN# 4738 00 3365 (PART)

OWNER OR CONTRACTOR CRAVEN, KEARNS, ET AL PHONE: Business 872-6645 Home

ADDRESS 374 LONG ISLAND ROAD, STATESVILLE, NC 28677

LOCATION NC 115 N, TR BRANCHWOOD RD, TL RIVERFIELD, TR GRASSY MEADOW, 7th LOT ON LEFT BEFORE BEAVERWOOD

SUBDIVISION RIVERCREST BLOCK / SECTION III LOT 48 LOT AREA 1.2135 ACRES SITE CLASS: PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 9-11-01

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1200 Linear Feet 200

No Lines FOUR Trench Width 24" Max Trench Bottom Depth 30"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: PPBPS, GRAVITY-FED

Repair System Description: LOW PRESSURE PIPE

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

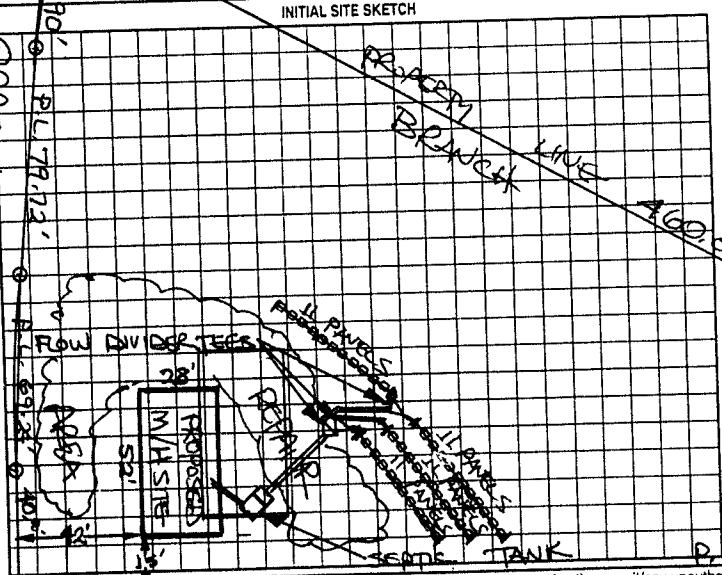
Water Supply: ☐ Individual ☑ Public ☐ Community

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

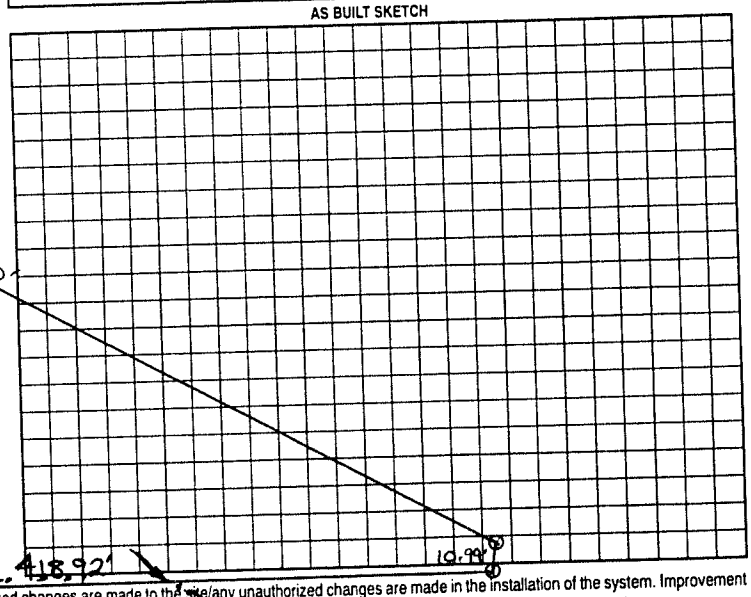
Comments/Conditions: INSTALL FORTY-FOUR (44) PPBPS PANELS IN FOUR EQUAL LENGTH LINES ON CONTOUR AS FLAGGED ON SITE

Comments/Conditions: OKay to locate 28'x56' House on this property for Mobile Home. POLYLOK FILTER USAGE

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 2-17-00 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 2-15-00 Operation Permit by: ____ date 11-28-01

Authorization to Construct by: STEVE HEDRICK date 2-15-00 Existing System Inspection by: ____ date ____

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