IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 109988 PIN# 4738-05-3691 DATE 11-18-02

OWNER OR CONTRACTOR KENNETH BENNETT PHONE Business 704-876-3345 Home

ADDRESS 480 BAILEY FARM ROAD, STATESVILLE, NC 28625

LOCATION NC 115 NORTH, TR BAILEY FARM ROAD, 1.6 MILES ON LEFT AT BOX # 480

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.03 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING 0.5 GPD/FT²

Septic Tank: EXISTING 1000 Gallons: STB Date

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines TWO Trench Width 36' Max Trench Bottom Depth Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

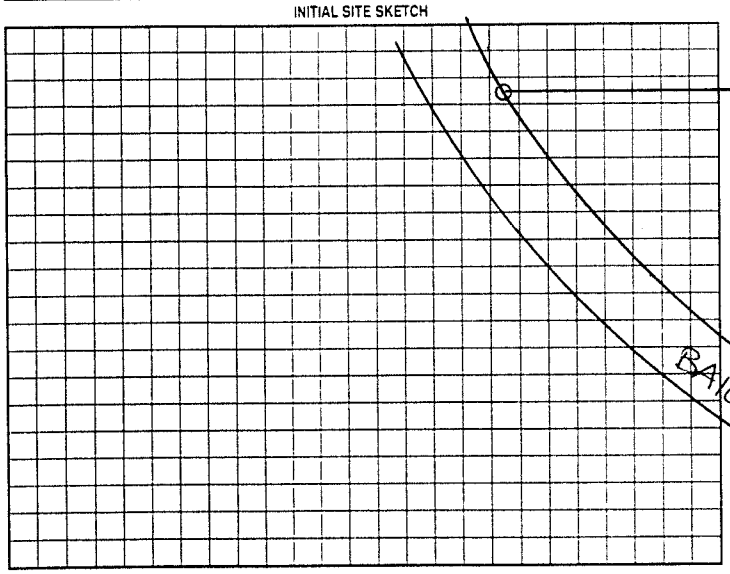
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

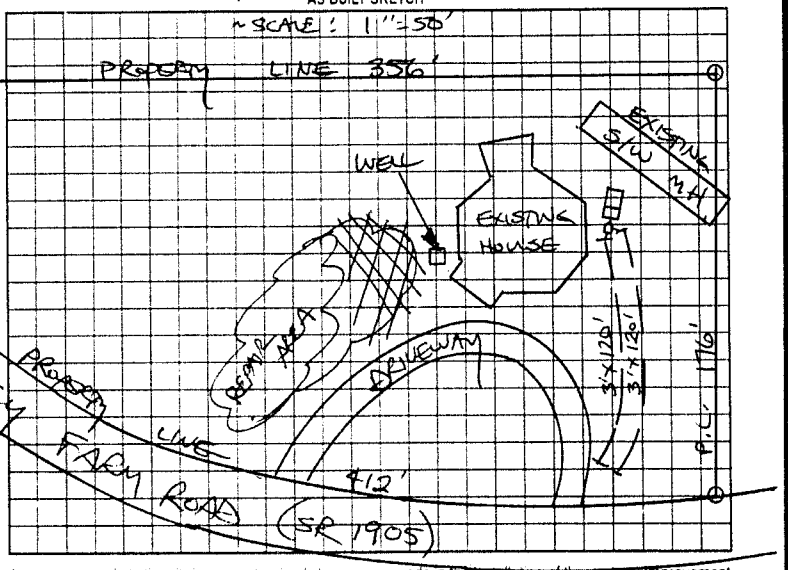
Comments/Conditions:

Comments/Conditions: ① S/W MH TO BE REMOVED UPON OCCUPANCY OF HOUSE ② SYSTEM UNDERSIZED ACCORDING TO TODAY'S STANDARDS ③ NO VEHICULAR TRAFFIC ALLOWED OVER SEPTIC SYSTEM

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

Operation Permit by date

Existing System Inspection by: STEVE HEDRICK date 11-18-02

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