IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (2) MOORESVILLE 704-664-5281

(2) (1)

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

PERMIT# 109458 PIN# 4738-58-2431 DATE 10-29-02

OWNER OR CONTRACTOR FIELDSTONE HOMES PHONE: Business Home 709-902-4982

ADDRESS 138 SOUTH YADKIN RIVER ROAD, STATESVILLE, NC 28625

LOCATION NC 115 N TR S. CHIPLEY FORD ROAD, TL, RIVER RUN ROAD, TR RIVER BANK ROAD, 7TH LOT ON RIGHT

SUBDIVISION RIVER RUN BLOCK / SECTION II LOT 8 LOT AREA 0.46 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A/R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 5-5-02

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1200 Linear Feet 300

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION, GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

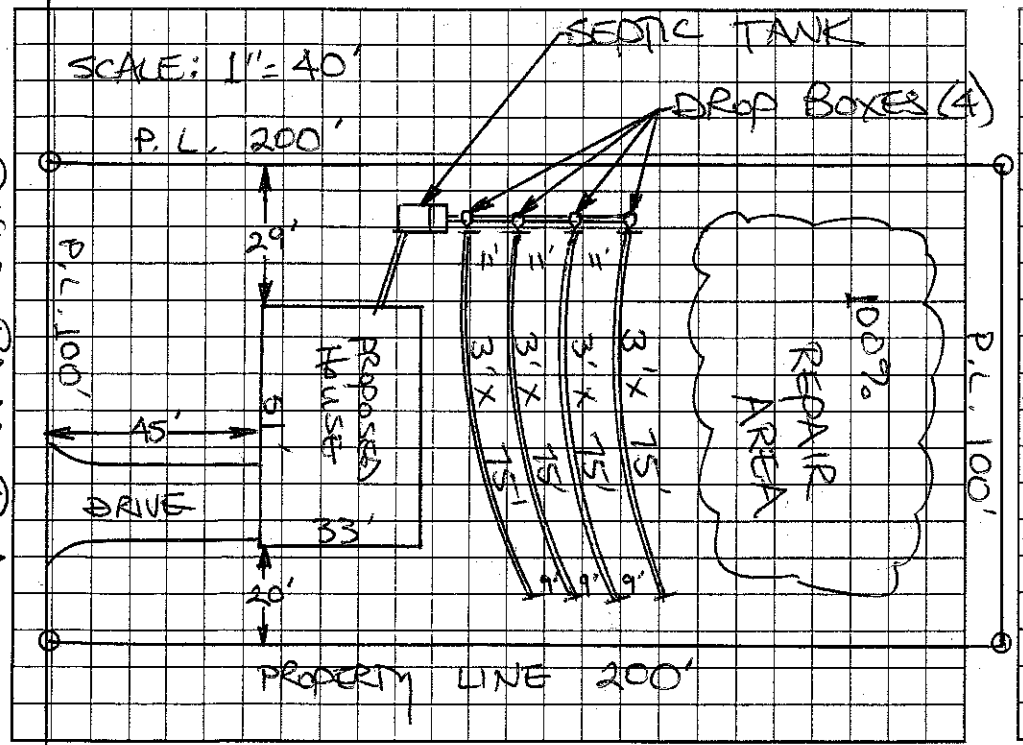
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions: INSTALL 48 CHAMBERS IN FOUR EQUAL LENGTH LINES (AT REQUEST)

Comments:/Conditions: (1) SYSTEM INSTALLED DURING EXTREMELY WET SOIL CONDITIONS (2) SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE 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: Kelli G. Hyde date 10-29-02 Installed by: STEVE JORDAN

Improvement Permit by: STEVE HEDRICK date 10-29-02 Operation Permit by: STEVE HEDRICK date 3-3-03

Authorization to Construct by: STEVE HEDRICK date 10-29-02 Existing System Inspection by: ____ date ____

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