IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 110686 PIN# 4739-30-7065 DATE 1-8-03

OWNER OR CONTRACTOR KEVIN G. HOPE PHONE: Business 704-902-4982 Home

ADDRESS 138 S. YADKIN RIVER ROAD, STATESVILLE, NC 28625

LOCATION NC 115 N, TR S. CHIPLEY FORD ROAD, TL RIVER RUN ROAD, ON LEFT NEAR END

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 4.997 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-3-03

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 THREE 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 _____

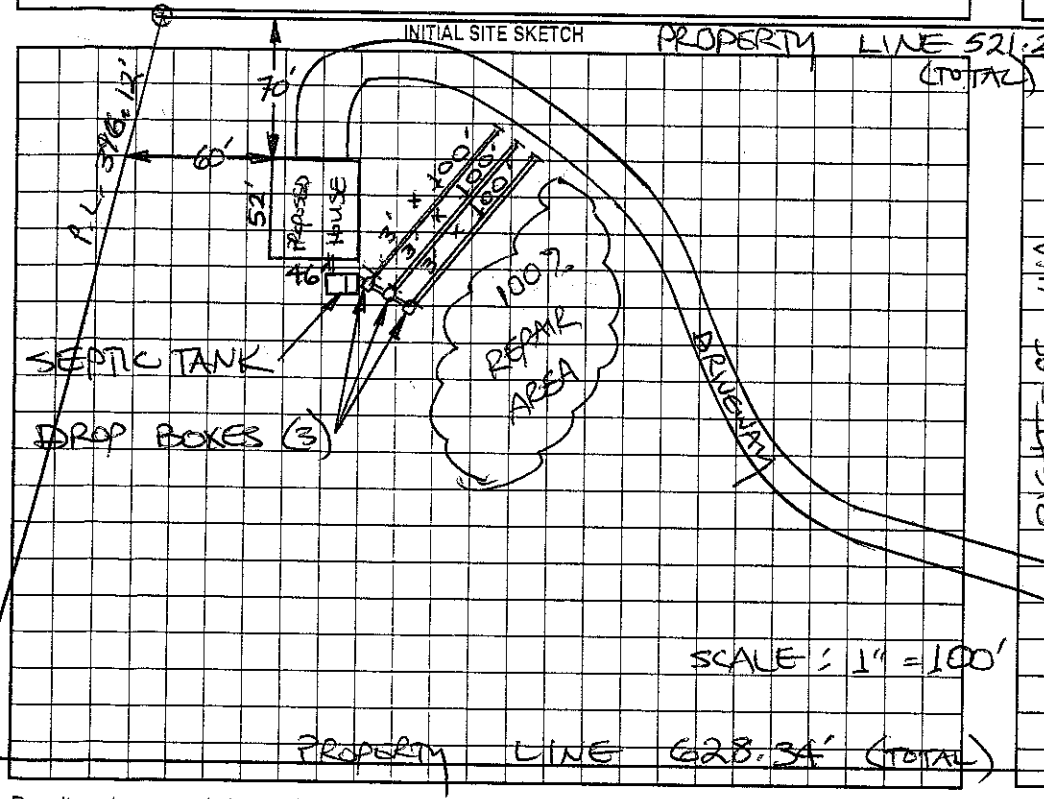
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

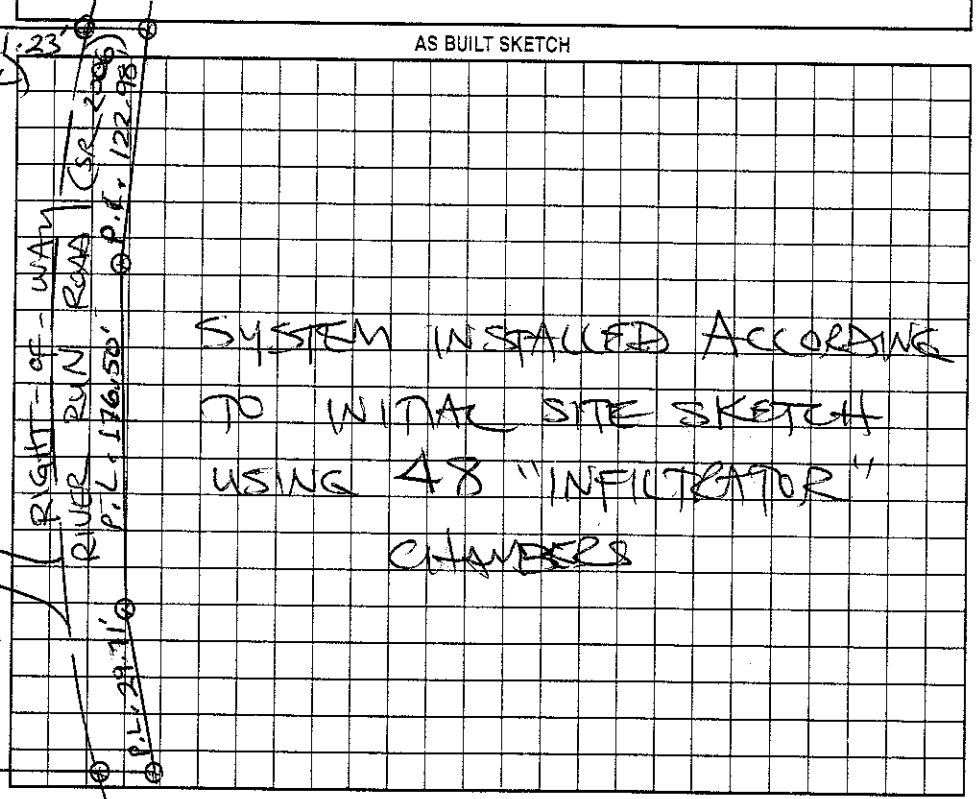
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ~~AS PER~~ AS SHOWN ON CONTOUR (OWNER'S REQUEST)

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FILTER

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: [signature] date 1-8-03 Installed by: STEVE JORDAN

Improvement Permit by: STEVE HEDRICK date 1-8-03 Operation Permit by: STEVE HEDRICK date 7-22-03

Authorization to Construct by: STEVE HEDRICK date 1-8-03 Existing System Inspection by: _____ date _____

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