IREDELL COUNTY HEALTH DEPARTMENT

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

CI

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

PERMIT# 100584 PIN# 4746 32 6370 DATE 6-11-01

OWNER OR CONTRACTOR JACK WHITE PHONE: Business 902-1364 Home

ADDRESS 106 PARKWOOD LN, STATESVILLE, NC 28677

LOCATION HWY 21 N, R RIMMER RD, L FAIRGATE IMMEDIATELY ON LEFT

SUBDIVISION FAIRVIEW ACRES BLOCK / SECTION LOT 12 LOT AREA .71 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 6-27-01
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'
No Lines 7 Trench Width 36" Max Trench Bottom Depth 36"

X New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAV CONV
Repair System Description: PUMP/CONV
Maintenance Agreement Required: ☐ Yes X No

Gravel Depth 12" ☐ Slab ☐ Crawl Space X Basement w/plumbing ☐ Basement wo/plumbing

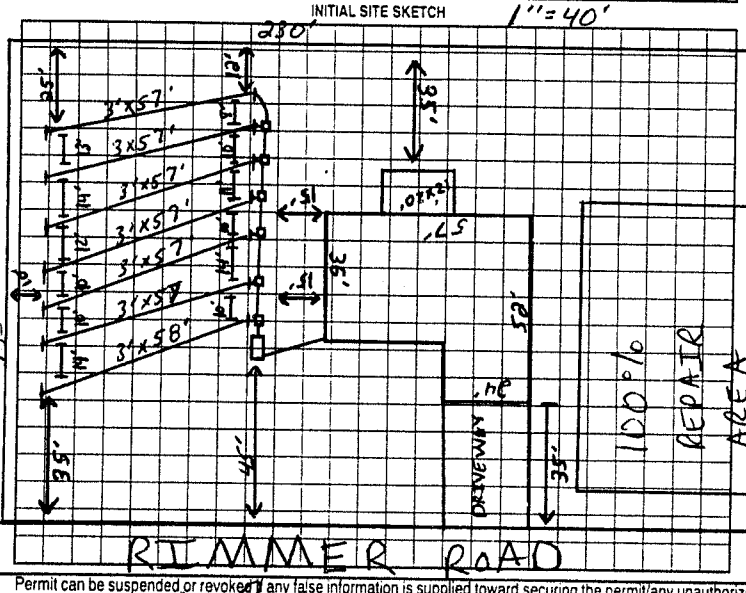
X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

Water Supply: ☐ Individual X Public ☐ Community

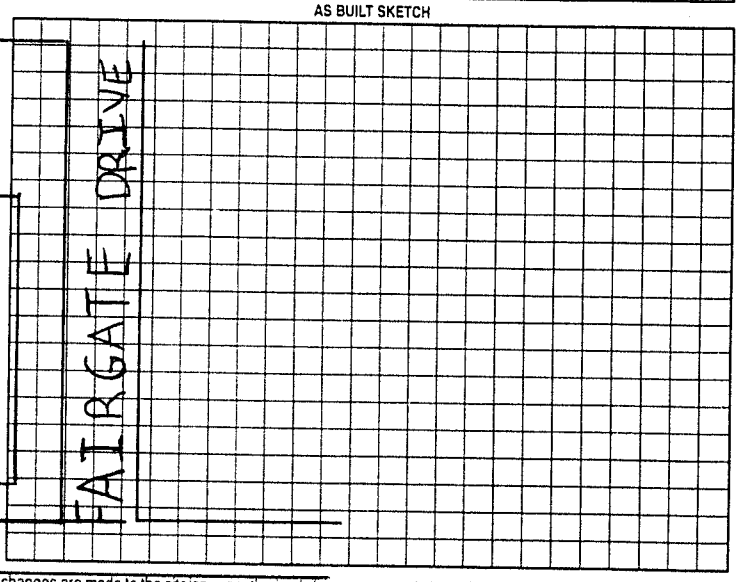
Comments/Conditions: (1) INSTALL LINES ON CONTOUR (2) MAINTAIN SETBACKS (3) USE DROP BOXES (4) DONOT FILL OR CUT OVER DRAIN FIELD AREA (5) USE Grinder Pump for BASEMENT PLUMBING ONLY & PUMP UP TO FLOOR

Comments/Conditions: LEVEL PLUMBING, THEN GRAVITY OUT TO TANK (6) MAINTAIN 15' SIDESLOPE SEPERATION TO BASEMENT FOUNDATION DRAIN
POLYLOK FILTER & MARKER

INITIAL SITE SKETCH 1"=40'



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 6/12/01 Installed by: Tommy Flick

Improvement Permit by: _____ RSI date 6-11-01 Operation Permit by: _____ date 11-7-01

Authorization to Construct by: _____ RSI date 6-11-01 Existing System Inspection by: _____ date _____

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