IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4746-35-4068 DATE 3-23-05

OWNER OR CONTRACTOR J. EDWIN HUNTER PHONE: Business 704-872-5800 Home 704-880-3494

ADDRESS 725 ST. ANDREWS RD, STATESVILLE, NC 28625

LOCATION US 21 N, TL STIMMAKER RD, TL W. EDISON DR, HOUSE ON RIGHT AT END

SUBDIVISION IREDELL HEIGHTS BLOCK / SECTION ____ LOT 213-215 LOT AREA 100' X 212' SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons: STB ____ Date ____

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 450 Linear Feet 150

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

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

System Description: CONVENTIONAL, GRAVITY

Repair System Description: CONV, GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

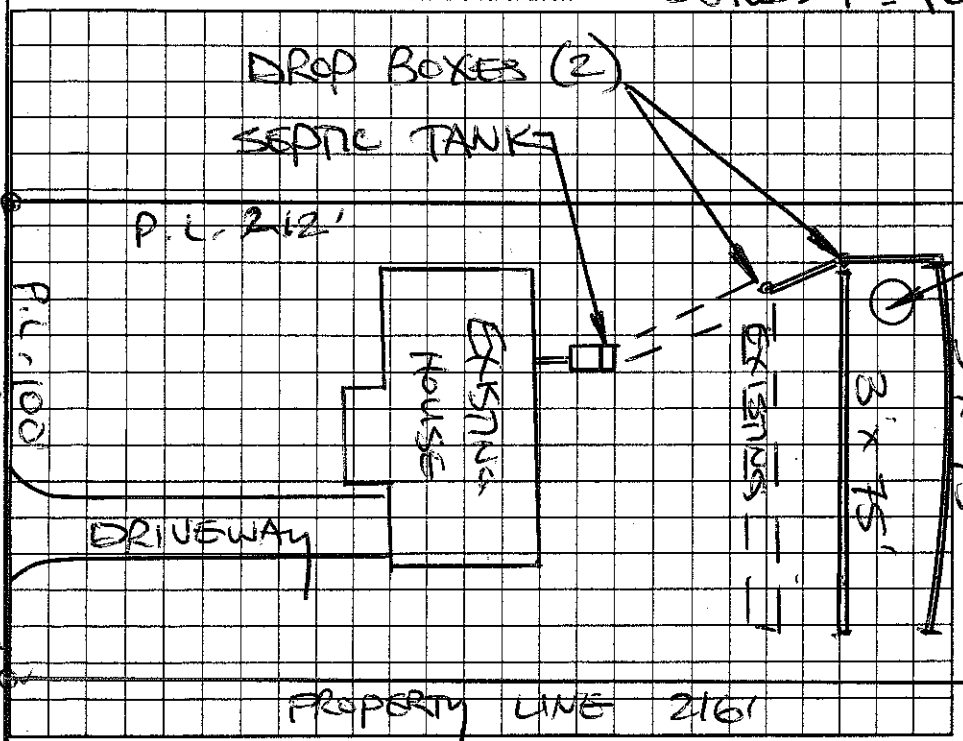
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

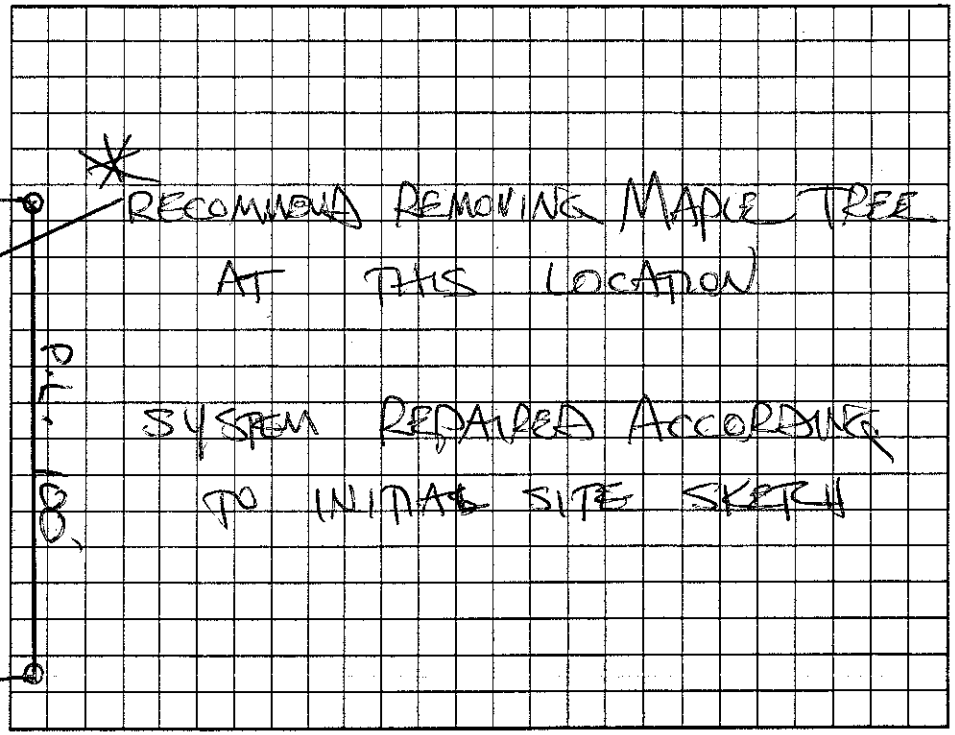
Comments:/Conditions: INTERCEPT EXISTING DRAINLINE AT LOCATION SHOWN WITH NEW DROP BOX FEEDING TWO NEW 3' x 75' LINES

Comments:/Conditions:

INITIAL SITE SKETCH SCALE: 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: Edwin J. Hunter date 3/23/05 Installed by: WES LYTON

Improvement Permit by: STEVE HEDRICK date 3-23-05 Operation Permit by: STEVE HEDRICK date 4-20-05

Authorization to Construct by: STEVE HEDRICK date 3-23-05 Existing System Inspection by: ____ date ____

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