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# DATE 10-24-00

OWNER OR CONTRACTOR BILLY & JEAN FOSTER PHONE: Business Home 876-6066

ADDRESS 206 PERSIMMON CIRCLE STATESVILLE, NC 28625

LOCATION US 21 NORTH, TL HOUPE ROAD, 0.4 MILE ON LEFT AT BOX # 209

SUBDIVISION BLOCK / SECTION LOT LOT AREA LIMITED 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 390 Linear Feet 130

No Lines 1 - BRANCH Trench Width 36" Max Trench Bottom Depth 36" +/- Gravel Depth 18"

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

System Description:

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: Yes ☑ No

☑ House/Mod Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other

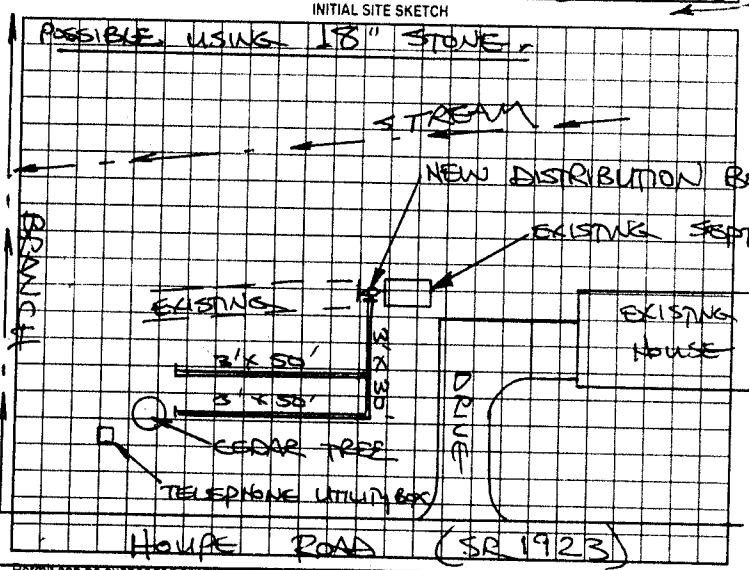
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

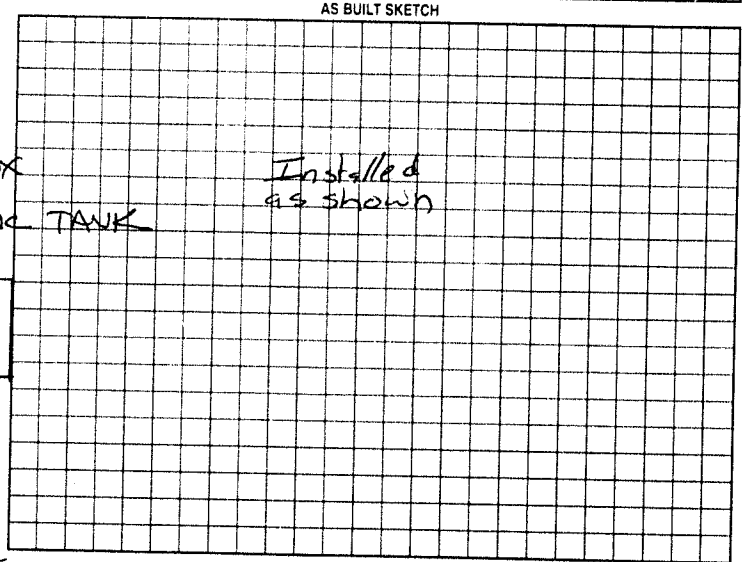
Comments/Conditions: ① INSTALL NEW SANITARY TEE IN SEPTIC TANK ② INSTALL NEW DIST. BOX AS SHOWN FEEDING NEW LINE 1ST ③ INSTALL NEW LINE BRANCHED AS SHOWN AS SHALLOW AS POSSIBLE, USING 18" STONE.

Comments/Conditions

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 10-24-00 Installed by: A-1 Backhoe

Improvement Permit by: STEVE HEDRICK date 10-24-00 Operation Permit by: [signature] date 11-1-00

Authorization to Construct by: STEVE HEDRICK date 10-24-00 Existing System Inspection by: date

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