IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 123511 PIN# 4747-29-9478 DATE 9-23-04

OWNER OR CONTRACTOR DIXIELAND INC PHONE: Business 704-202-4971 Home 704-876-6162

ADDRESS 823 JENNINGS RD STATESVILLE NC 28625

LOCATION 21 NORTH (R) JENNINGS (L) DEER CROSSING (R) AT END ON SUNDALE LOT ON RT

SUBDIVISION DEER CROSSING BLOCK / SECTION IV LOT 48 LOT AREA .975AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 4-17-05
Pump Tank: 1000 Gallons; PT 3022 Date 4-6-05
Pump Make: Zoeller Model N 140-C Serial No. 140-0002
Nitrification Field: No Fields 1 Square Feet EQ=1720 Linear Feet 300'
No Lines 4x75 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

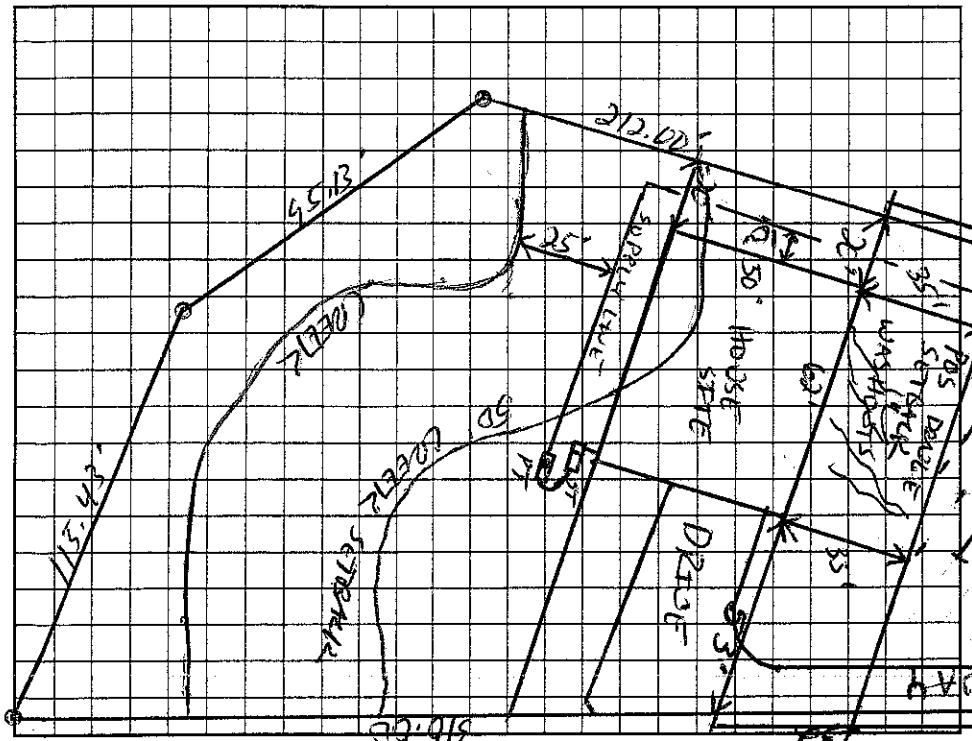
☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: PUMP 250/D REDUCT
Repair System Description: LP 50%D REDUCT
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

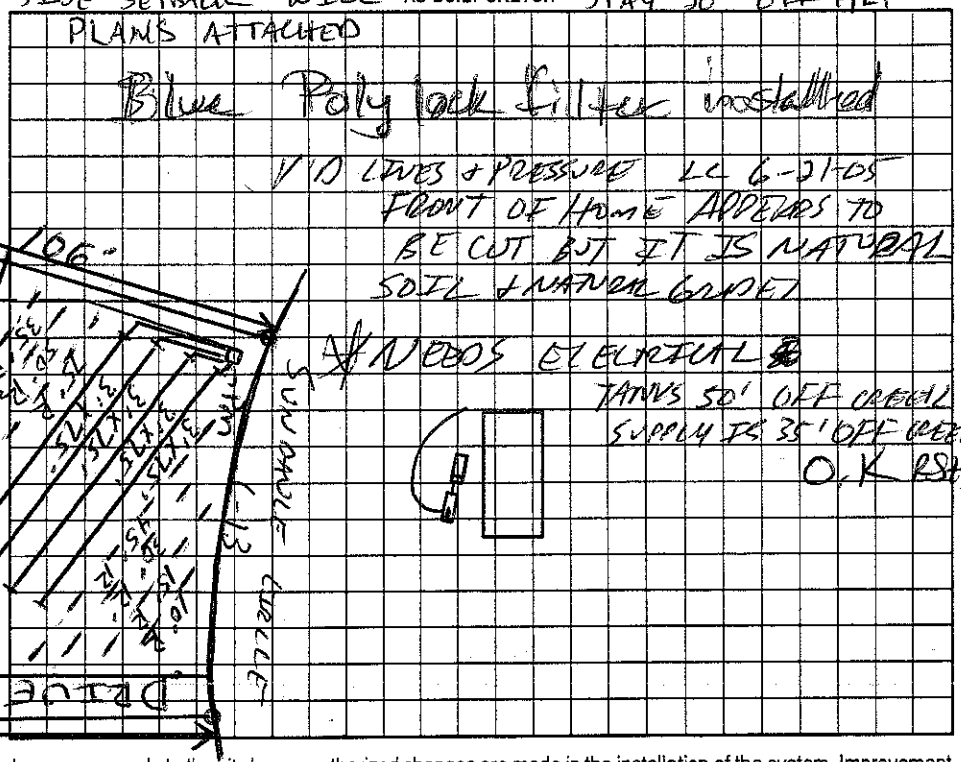
Water Suppiy: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions: (1) SYSTEM, REPAIR, HOUSE & P/L COMPLETELY FLAGGED OUT ON LOT (2) INSTALL LINES ON CONTOUR (3) MAINTAIN SETBACKS (4) IP ONLY * WASHOUTS IN FRONT OF HOUSE SITE MUST BE FILLED & PACKED 134 AC IS SIGNED OFF ON. ALSO NEED HOUSE PLANS. 3-30-05 - Approved a 76'x45' HOUSE PLAN, 3 BEDROOM, KEEP HOUSE FRONT IN SAME LOCATION & NON DRIVEWAY SIDE SETBACK WILL STAY 20' OFF P/L. PLANS ATTACHED

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: _____ date 10-4-04 Installed by: KOWAN SEPTIC

Improvement Permit by: _____ date 9-23-04 Operation Permit by: STEVE HEDRICK date 7-21-05

Authorization to Construct by: _____ date 3-30-05 Existing System Inspection by: _____ date _____

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