2-2:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 130967 PIN# 4747651626 4747651626 DATE 10-5-05

OWNER OR APPLICANT Alan Wt & Dana PHONE: Business 704-902 4669 Home 704-902-4669

ADDRESS 414 Jennings Rd Statesville NC 28625

LOCATION 211 White Barn Rd to Donsdale House on right - Site address - 165 Donsdale Dr.

SUBDIVISION Donsdale BLOCK / SECTION 1 LOT 10 LOT AREA .741 SITE CLASS. B DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 7-3-06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ____ Square Feet 1200 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 24"

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

System Description: 25% Grade

Repair System Description: 25% Pump

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

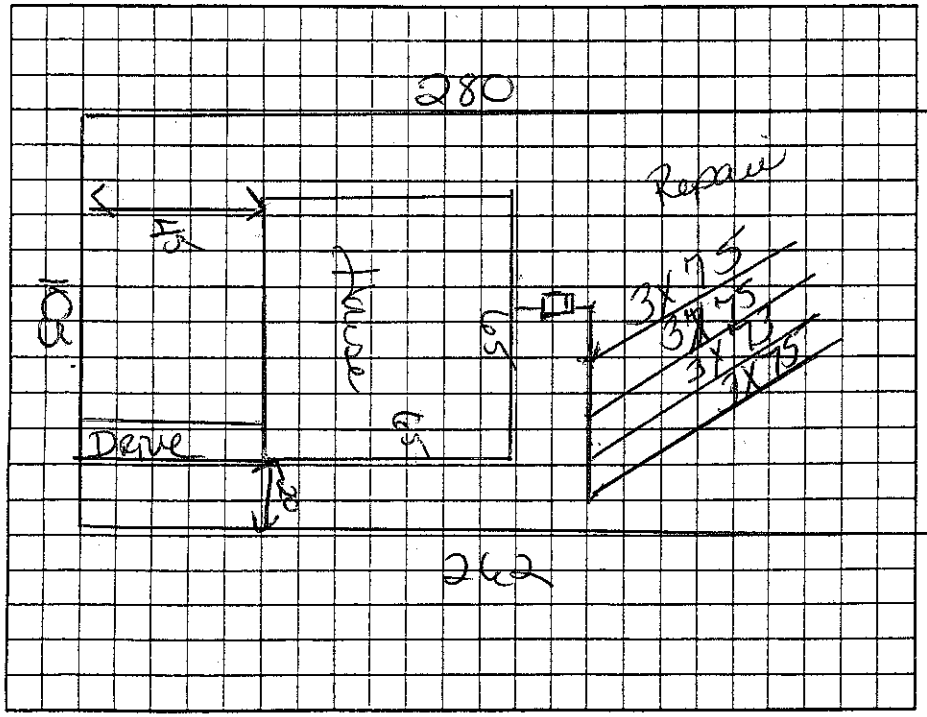
Water Supply: ☐ Individual ☑ Public ☐ Community

Gravel Depth NR ☐ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

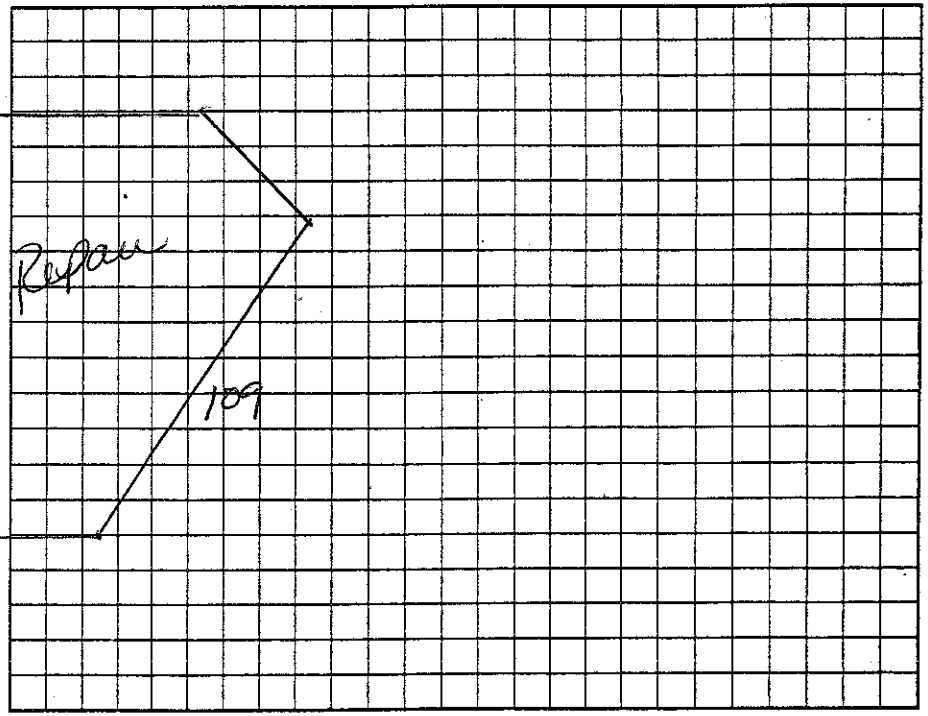
Comments:/Conditions: Install as Contour Maintain all setbacks Use ind caps as distribution devices

Comments:/Conditions: no risers, ST, black 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 Kevin Bowles date _____

Improvement Permit by: Leigh Cook date 10-05-06

Authorization to Construct by: Leigh Cook date 10-05-06

Installed by: K & M Grading

Operation Permit by: James Edwards date 8-11-06

Existing System Inspection by: _____ date _____

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