IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 102287 PIN# 4748 - 44 - 2995 DATE 9-19-01

OWNER OR CONTRACTOR ISHMEL MEADE PHONE: Business _____ Home (704) 528-1436

ADDRESS 243 SUMMERTREE DR TROUTMAN NC 28166

LOCATION US 21 N TL JENNINGS ROAD CROSS S. YADKIN RIVER 0.3 MILE ON RIGHT

SUBDIVISION PATTERSON ACRES BLOCK / SECTION _____ LOT 3 LOT AREA 2.0 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 794 Date 7-30-01
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR 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: CONVENTIONAL GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

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

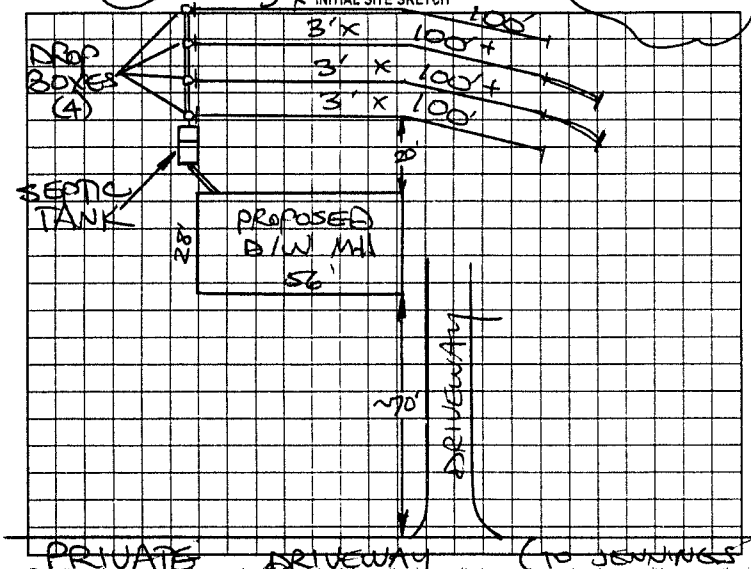
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: 100% REPAIR AREA

Comments/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER
② ADDITIONAL LINE LENGTH ADDED TO TWO MIDDLE LINES DUE TO STONE DEPTH INSUFFICIENCY

3'X INITIAL SITE SKETCH



AS BUILT SKETCH

AS SHOWN

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: X Ishmel Meade date 9-19-01
Improvement Permit by: STEVE HEDRICK date 9-19-01
Authorization to Construct by: STEVE HEDRICK date 9-19-01

Installed by: CRAIG THOMPSON
Operation Permit by: STEVE HEDRICK date 11-14-01
Existing System Inspection by: _____ date _____

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