IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210390

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

PIN # 4749 53 4351

APPLICANT: Nathan Somers APPLICANT ADDRESS: 5760 Wilkesboro Hwy Union Grove NC 28689

SITE ADDRESS: 119 FRIENDSHIP ROAD STATESVILLE, NC 28625 PHONE: 704 592 5092 ALT. PHONE: 704 239 3693

SITE DIRECTIONS: 21 North @ Jennings @ Friendship on Left Before Bussell ROAD

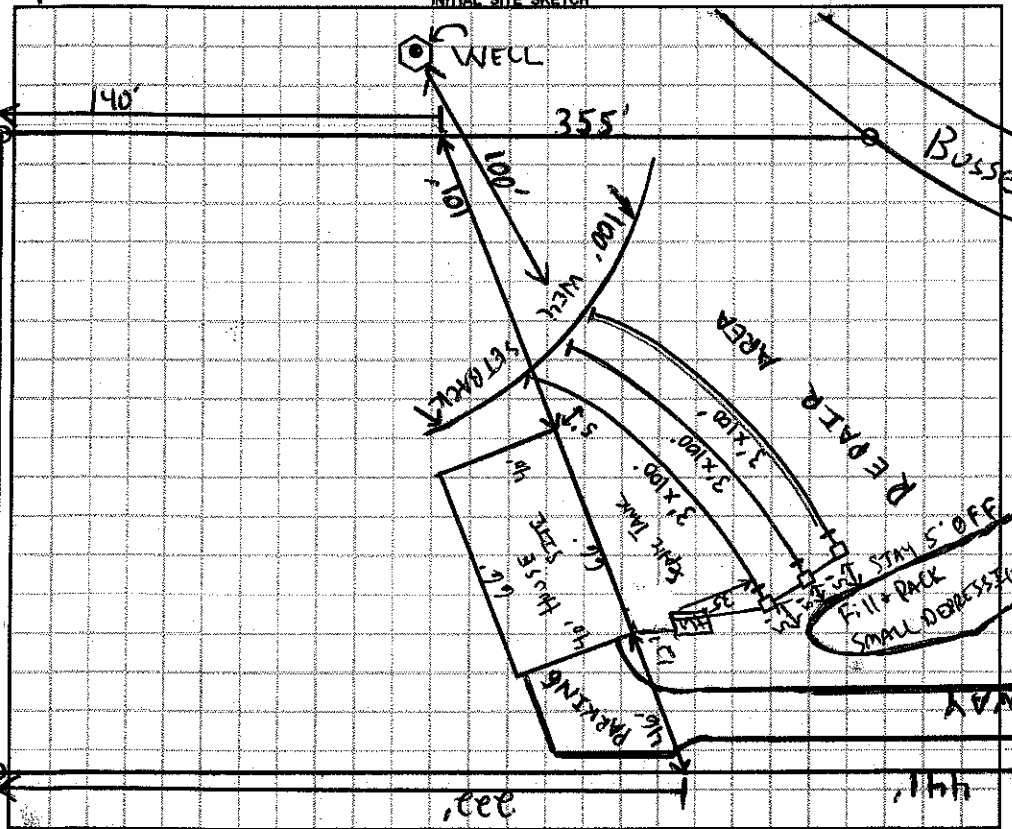
SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 2.0 ACRES DESIGN FLOW: 360 L.T.A.R.: .3

Septic Tank	1000	(gal)	STB 760-1000	Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank		(gal)	PT	Date		System Description: Gravity 25% REDUCTION				☐ Business	No. Persons 4
Pump Make		Model		Serial #		Repair System Description: SAME				☐ Other	No. Employees
# Nitrification Fields	1	# Lines	3 x 100'	Linear Ft:	300'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

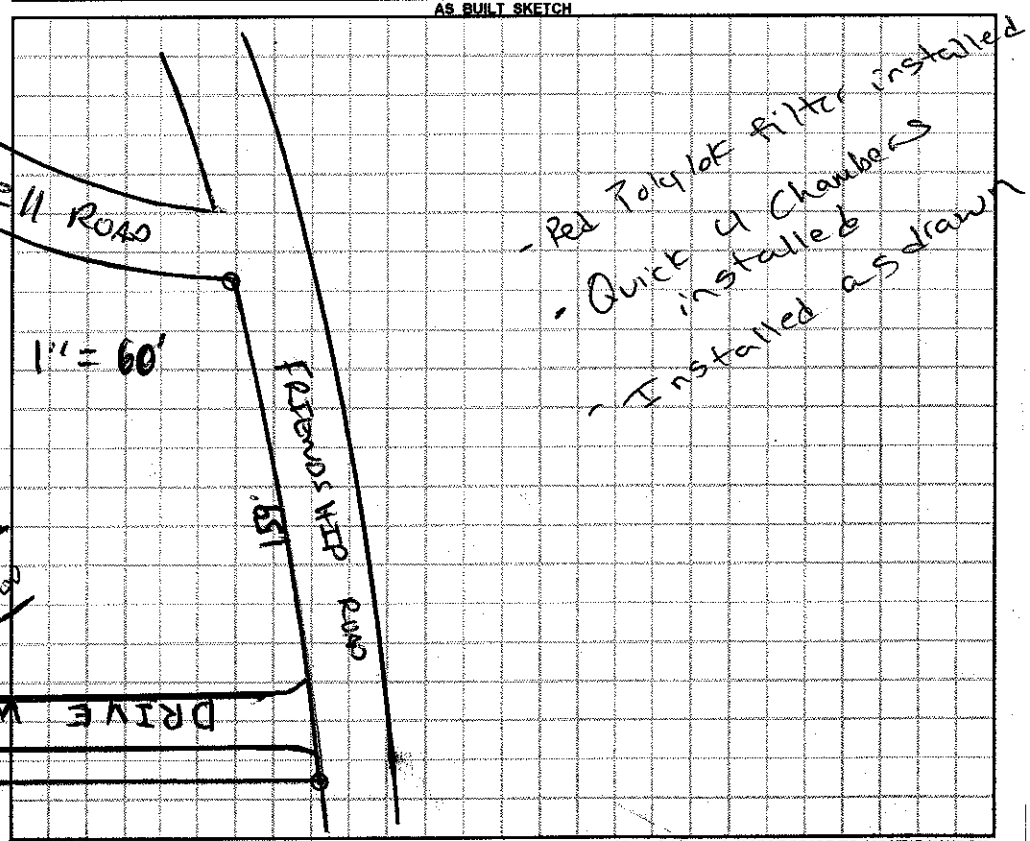
Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: (1) System must be 100' from well due to separation lines and repair. (2) System and house is staked/flagged. Property lines are marked. (3) Install lines on contours and maintain setbacks (4) Fill and pack small depression and stay 5'+ off of depression edge with septic (5) House box includes porches and decks.

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Nathan Somers Date: 7/7/15 Installed by: Tim Abee

IMPROVEMENT PERMIT by: Date: 6-30-15 OPERATION PERMIT by: Date: 9-21-15

AUTHORIZATION TO CONSTRUCT by: Date: 6-30-15 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK