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# 4753 43 6012 DATE 4-30-03

OWNER OR CONTRACTOR STEPHEN POPE PHONE: Business 902-2449 Home 704-883-9896

ADDRESS 303 THIRD CREEK ROAD STATESVILLE, NC 28677

LOCATION US 70 EAST, TR THIRD CREEK ROAD, HOUSE ON LEFT AT BOX #303

SUBDIVISION ICENHOUR BLOCK / SECTION ____ LOT 7 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 ____ Linear Feet EXISTING

No Lines ____ Trench Width ____ Max Trench Bottom Depth ____ Gravel Depth ____

☒ 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 2

☐ Business No. Employees ____

☐ Other ____

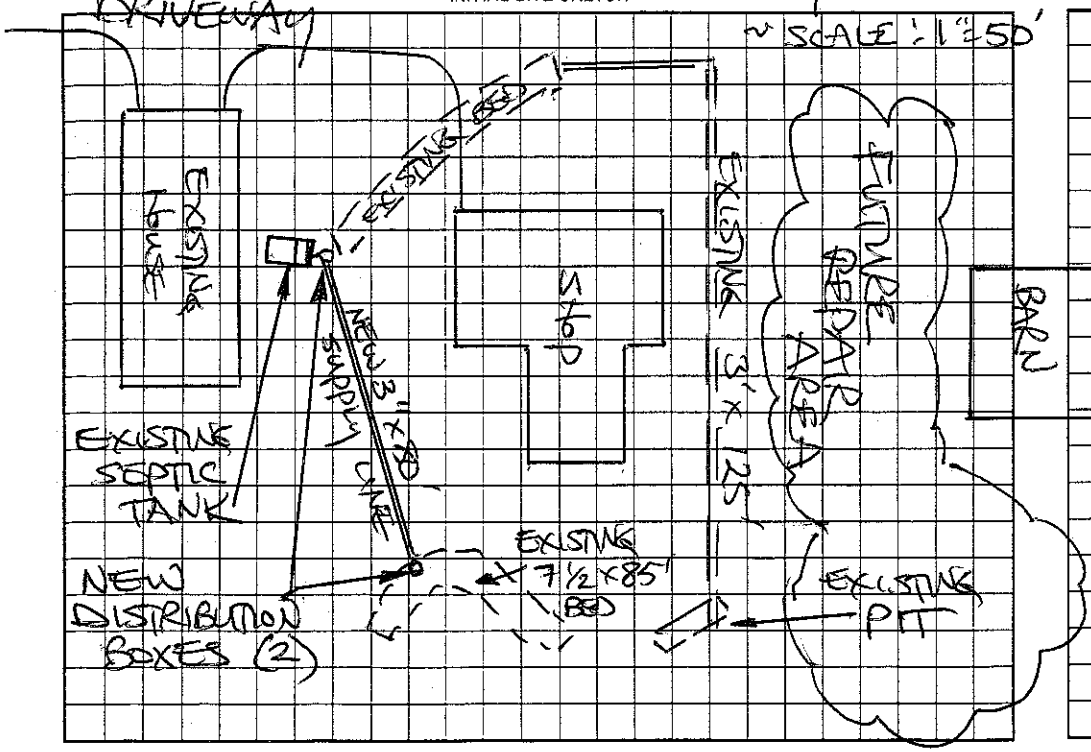
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

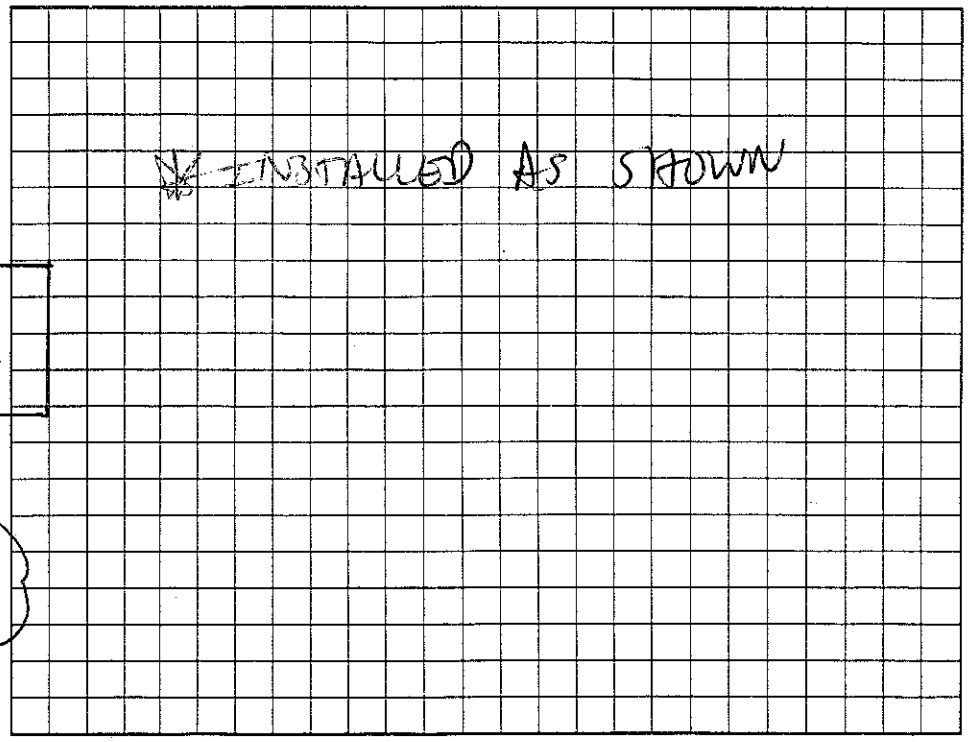
Comments/Conditions: ① INSTALL NEW DISTRIBUTION BOXES (2) AT LOCATIONS SHOWN TYING OLD DRAINFIELD INTO SYSTEM FEEDING IT FIRST ② THIS PERMIT SERVES AS "NOTICE OF VIOLATION". REPAIR BY 5/30/03

Comments/Conditions: * INSTALL DURING EXTREME SOIL DRYNESS *

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 4-30-03 Installed by: MARTY TUCKER

Improvement Permit by: STEVE HEDRICK date 4-30-03 Operation Permit by: [signature] date 06/03/03

Authorization to Construct by: STEVE HEDRICK date 4-30-03 Existing System Inspection by: ____ date ____

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