IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT# BF 218727

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

PIN # 4753474053 ✓

APPLICANT: Brian Ostwalt APPLICANT ADDRESS: 114 St Paul Ln Statesville NC

SITE ADDRESS: 114 St Paul Ln Statesville NC PHONE: 704-880-8201 ALT. PHONE: 704-880-8558

SITE DIRECTIONS: 70E T/R St Paul Ln 2 brick house on right

SUBDIVISION: Mary A Keller SECTION: N/A LOT # 14-16 LOT AREA: 0.428ac DESIGN FLOW: Ex L.T.A.R.: Ex

Septic Tank	1000 (gal)	STB	1600	Date	4-8-16
Pump Tank	N/A (gal)	PT	N/A	Date	N/A
Pump Make	N/A	Model	Tank/Lid	Serial #	PL-64
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex
Trench Width	Ex	Max. Trench Bottom Depth	Ex	Gravel Depth	Ex

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

System Description: Tank

Repair System Description:

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms Ex

No. Persons Ex

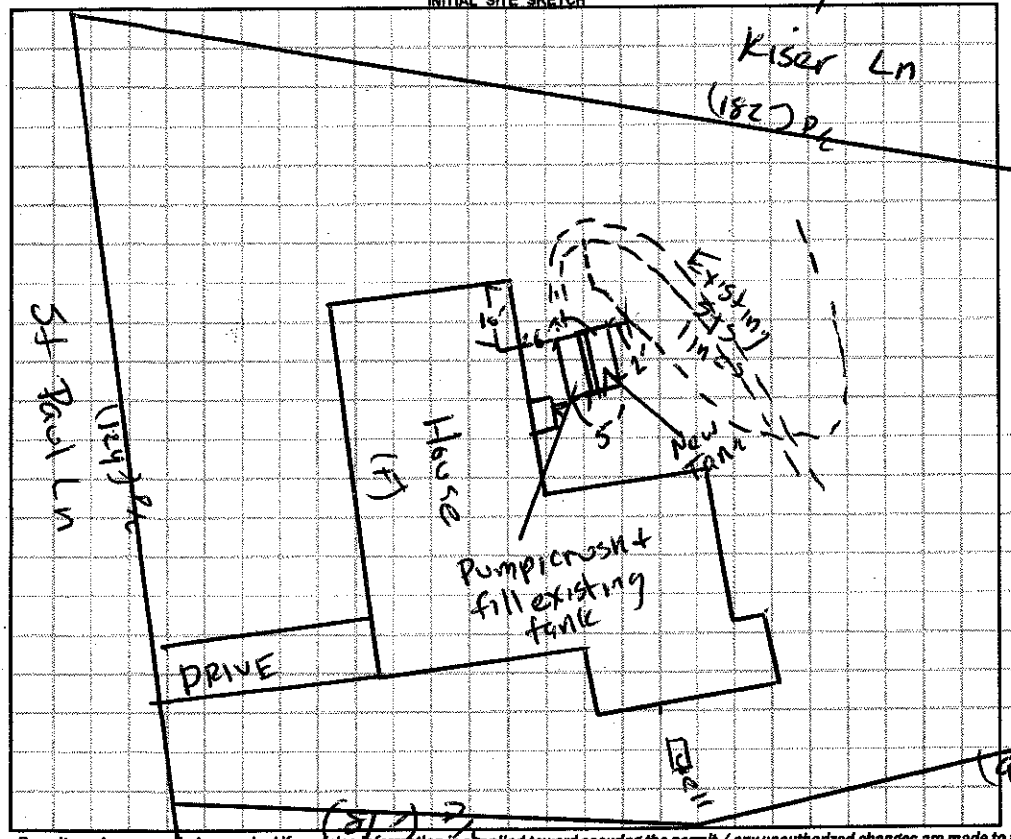
No. Employees

☒ Crawl Space ☐ Basement w/o plumbing

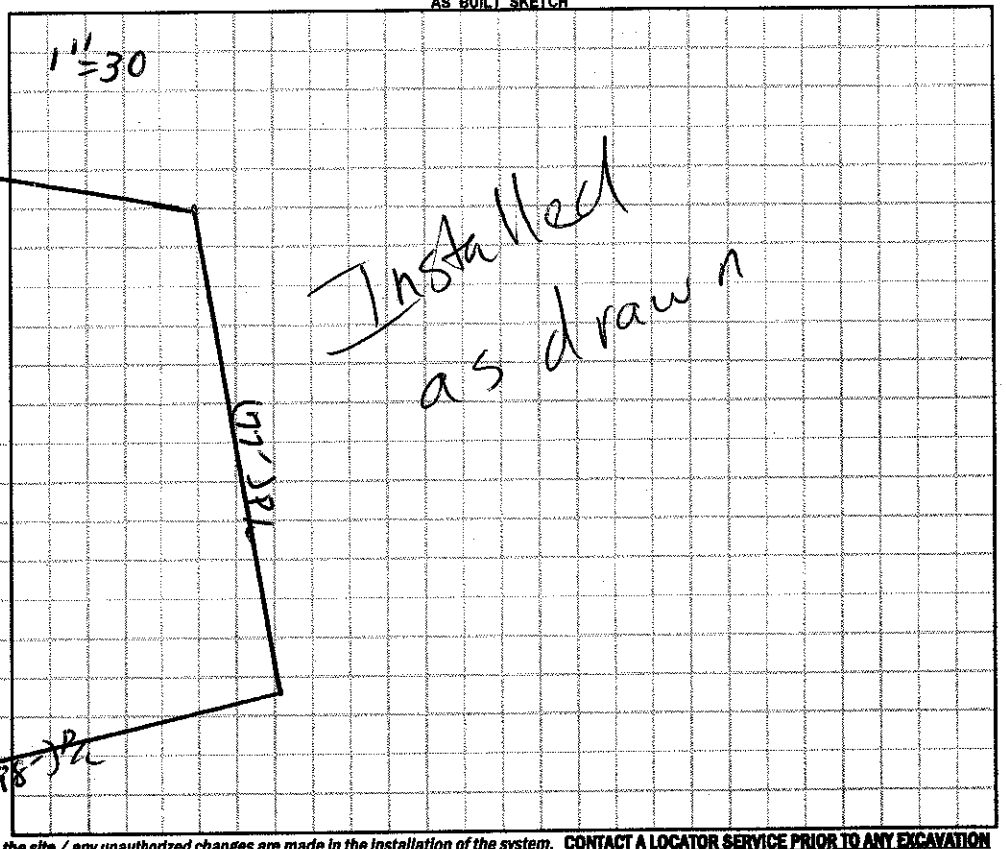
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Maintain 5' off any building foundation and 2' off any existing tail line. Pump, Crush + fill existing tank. Maintain 50' off any well

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: Brian Ostwalt Date:

IMPROVEMENT PERMIT by: David A Thom Date: 05/19/16

AUTHORIZATION TO CONSTRUCT by: David A Thom Date: 05/19/16

Installed by: K+M Grading

OPERATION PERMIT by: David A Thom Date: 06/09/16

Existing System Inspected by: Date:

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