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# 4953-56-7869 + 4953-56-7793 DATE 5/1/03

OWNER OR CONTRACTOR David L. Cryder PHONE: Business _____ Home (704) 872-0633

ADDRESS 105 Oak Grove Rd. Statesville N.C. 28677

LOCATION Hwy 70 East, Corner Oak Grove Rd and Hwy 70 E.

SUBDIVISION _____ BLOCK / SECTION — LOT _____ LOT AREA _____ SITE CLASS. V5 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 900 Gallons; STB 1012 Date 9-25-02

Pump Tank: 1000 Gallons; PT 17 Date 3-3-03

Pump Make: Goulds Model WE0511HA Serial No P033B063

Nitrification Field: No Fields 1 Square Feet 420 Linear Feet 400'

No Lines 6 @ 67' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 15"

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

System Description: _____

Repair System Description: Pump, Conventional

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees ____

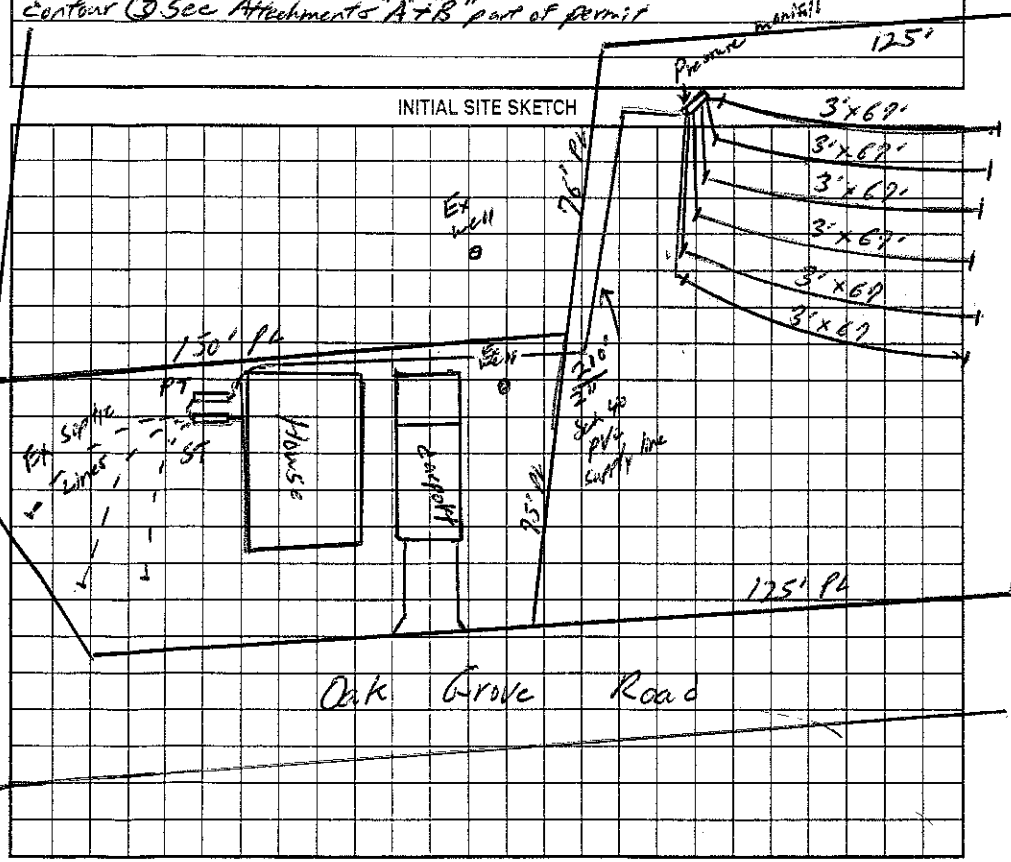
☐ Other _____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: ① Keep System 50ft From Wells ② Install lines on Contour ③ See Attachments "A" & "B" part of permit

INITIAL SITE SKETCH



Comments/Conditions: Lines - Okay 5/16/03

- Pressure Check, Electrical + Alarm check 5/22/03 SH

AS BUILT SKETCH

Installed As Shown per Initial Site 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: David L. Cryder date _____

Improvement Permit by: William G. Johnson date 5/1/03

Authorization to Construct by: William G. Johnson date 5/1/03

Installed by: A-1 Backhoe (5/16/03)

Operation Permit by: William G. Johnson date 5/30/03

Existing System Inspection by: _____ date _____

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