# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122564 PIN# 4754-54-7438 DATE 8-10-04

OWNER OR CONTRACTOR HASAN HOME IMPROVEMENT PHONE: Business 704-450-5898 Home 704-872-2617

ADDRESS 216 ARMFIELD STREET, STATESVILLE, NC 28677

LOCATION EAST GREENBRIAR ROAD to ABSHER ROAD, 8TH HOUSE ON LEFT AT BOX #910

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 0.54 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ. TO 640 Linear Feet 160

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" ~~Gravel~~ Depth N/A

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

System Description: _____

Repair System Description: 25% REDUCTION, PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees _____

☐ Other _____

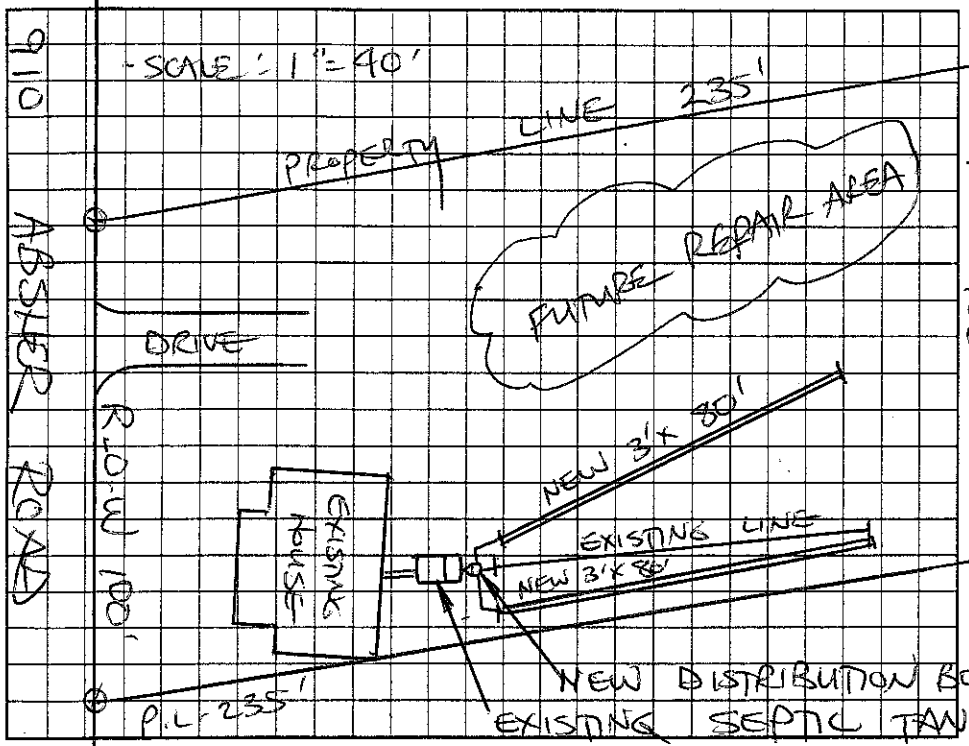
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: ① INSTALL NEW DISTRIBUTION BOX AT LOCATION SHOWN. ② INSTALL TWO NEW 3'x80' DRAINLINES USING 25% REDUCTION SYSTEM ③ REPLACE SANITARY TEE IN SEPTIC TANK

Comments:/Conditions:

INITIAL SITE SKETCH




AS BUILT SKETCH

SYSTEM EXPANDED ACCORDING TO 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: Omar T. Hasan date 8-11-04

Improvement Permit by: STEVE HEDRICK date 8-10-04

Authorization to Construct by: STEVE HEDRICK date 8-10-04

Installed by: IREDELL BACKHOE

Operation Permit by: STEVE HEDRICK date 8-18-04

Existing System Inspection by: _____ date _____

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