704-507-4950 ERIC - 664-5800 SUPERINTENDENT CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 108167 PIN# 4754-55-8368 DATE 10-22-02

OWNER OR CONTRACTOR BRIAN STOCKTON PHONE: Business 704-598-5800 Home 704-883-0841 704-280-0841

ADDRESS 566 S. GREENBRIAR RD STATESVILLE, NC 28625

LOCATION 64 EAST, R GREENBRIAR, R AT BOX # 566 OFF ROAD 1469 well #

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.955 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 5-6-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3x133 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

X New System ☐ Repair System Type: I II III IV V VI
System Description: CONV GRAV
Repair System Description: LP 250 gal PRODUCT
Maintenance Agreement Required: ☐ Yes X No

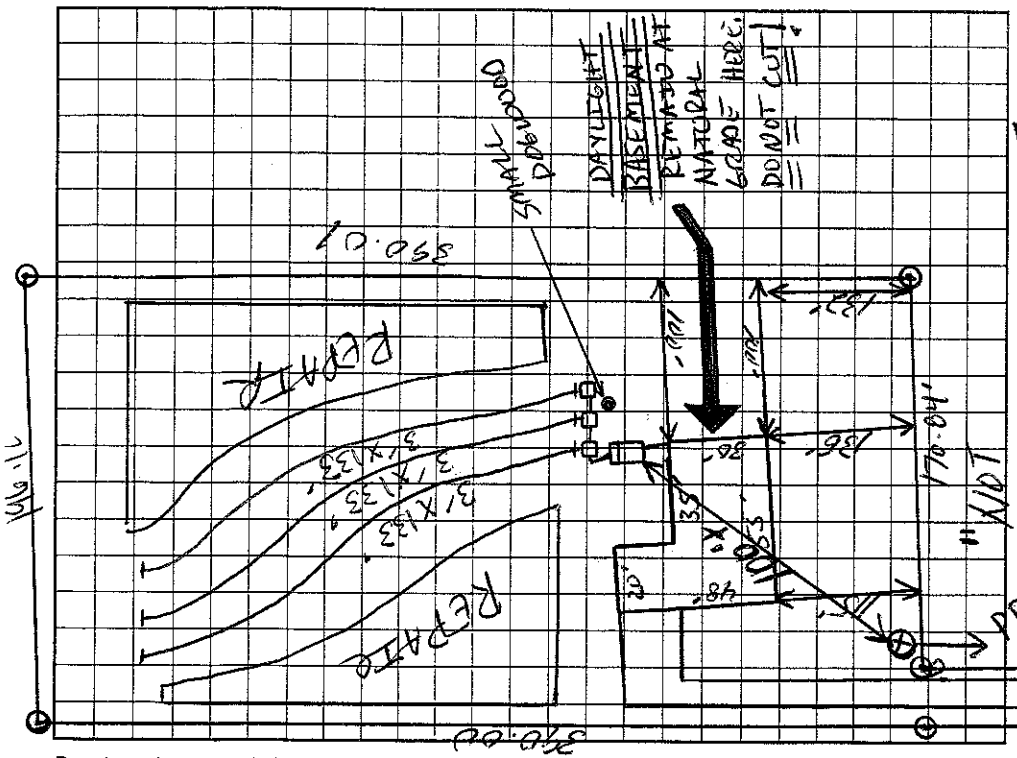
X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☐ Crawl Space X Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: X Individual ☐ Public ☐ Community
WELL

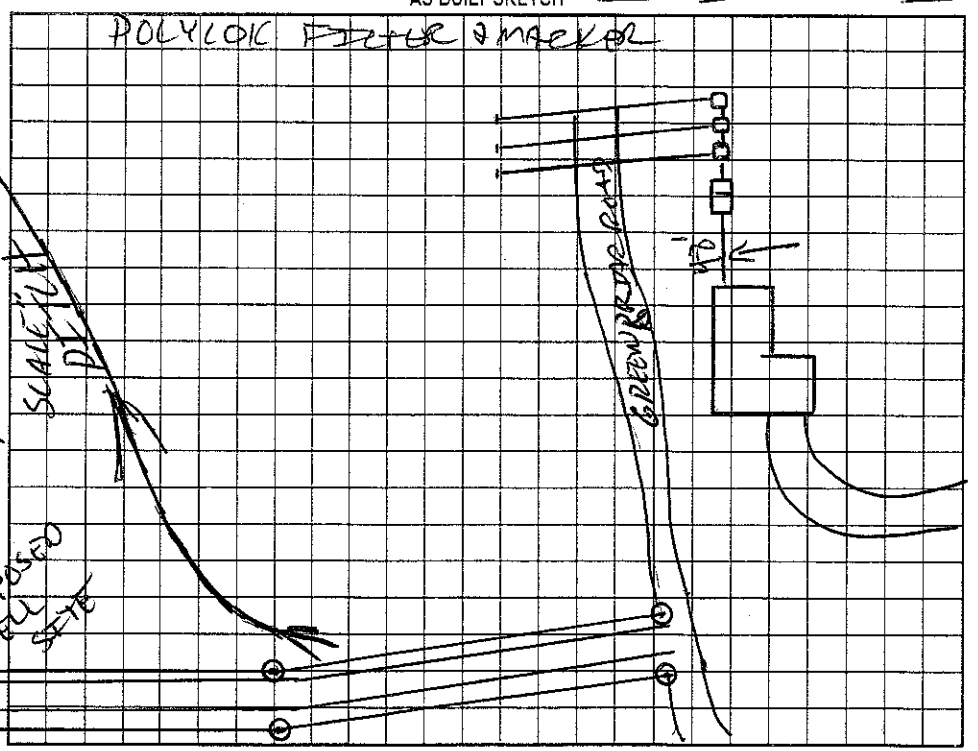
Comments/Conditions: ① IF CUT BELOW NATURAL GRADE ON BASEMENT DAYLIGHT END, IT WILL VOID PERMIT. DO NOT CUT! ② MAINTAIN SETBACKS ③ INSTALL LINES ON CONTOURS ④ KEEP WELL 100' FROM SEPTIC

Comments/Conditions: ① REPAIR. ② MET ON 11-26-02 & SHIFTED SYSTEM DOWN HILL. FIRST LINE IS 20' BELOW SMALL DOGWOOD & LAST LINE IS 40' OFF BOTTOM P/L. SYSTEM IS FLAGGED OUT!

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: Paula Dyer date _____ Installed by: IREDELL BACKHOE & SEPTIC

Improvement Permit by: RS date 10-22-02 Operation Permit by: RS date 6-25-03

Authorization to Construct by: RS date 10-22-02 Existing System Inspection by: _____ date _____

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