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# 4755947504 DATE 30 April-07

OWNER OR APPLICANT Rebecca A Hodges PHONE: Business 704-873-0281 Home 704-838-0002

ADDRESS 390 Knocksville Hwy Statesville, NC 28625

LOCATION 64E East JNO Bess Store Box 390 Brick house

SUBDIVISION PARKER BLOCK / SECTION ____ LOT 17-22 LOT AREA LIMITED SITE CLASS. RS DESIGN FLOW 240 L.T.A.R. 3

Septic Tank: Existing Gallons: STB ____ Date ____

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 200

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: ____

Repair System Description: 25% Gravity

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth NA ☑ Gravity ☐ Pressure

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other ____

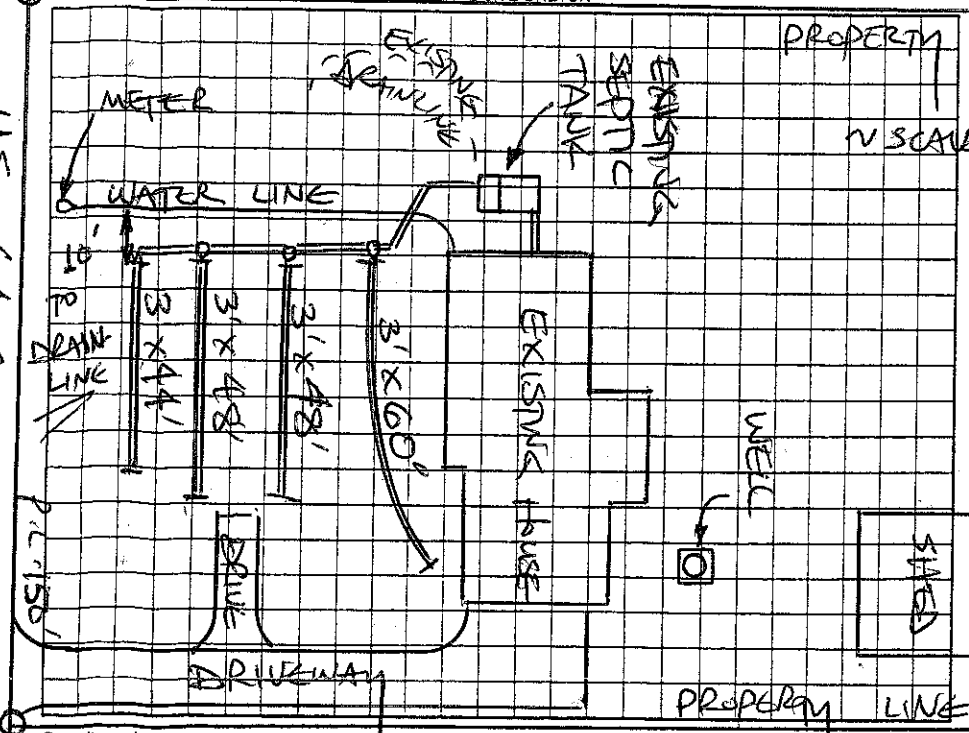
Water Supply: ☐ Individual ☑ Public ☐ Community

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

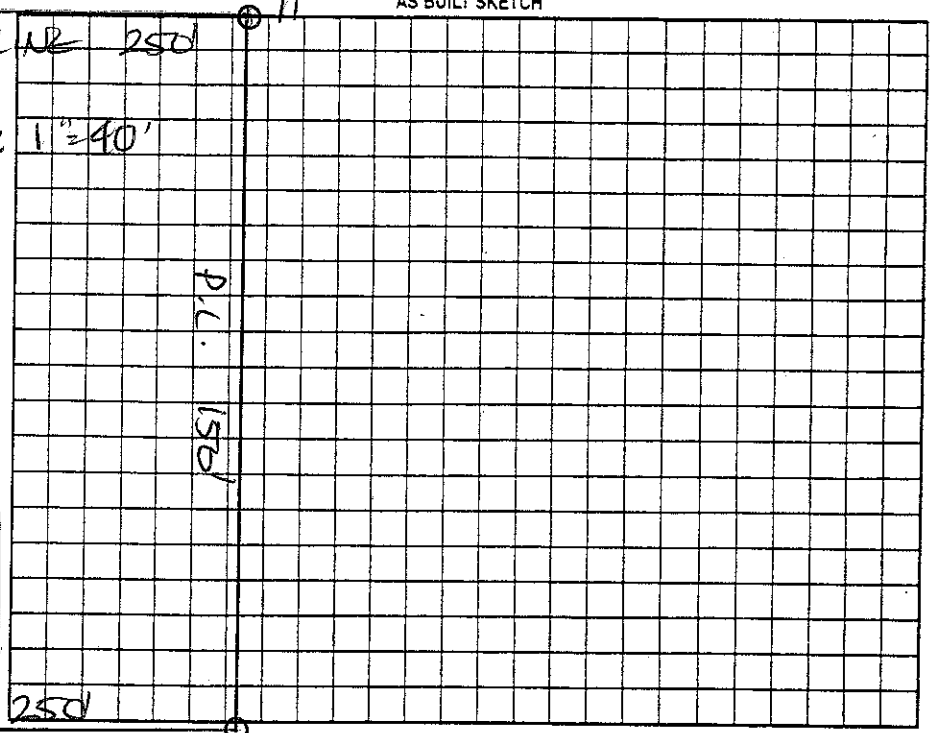
Comments/Conditions: INSTALL 25% REDUCTION SYSTEM
Install on Contour
Maintain all setbacks - KEEP
SYSTEM MINIMUM 25' FROM DITCH, 10' FROM WATER LINE

Comments/Conditions:
15
12
12
11

INITIAL SITE SKETCH



AS BUILT SKETCH



US 64 EAST

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: Linda Wandt date 4-30-07 Installed by: Steve Jordan

Improvement Permit by: Brick Cook date 30 April 07 Operation Permit by: Brick Cook date 14 May 07

Authorization to Construct by: Brick Cook date 30 April 07 Existing System Inspection by: ____ date ____

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