IREDELL COUNTY HEALTH DEPARTMENT

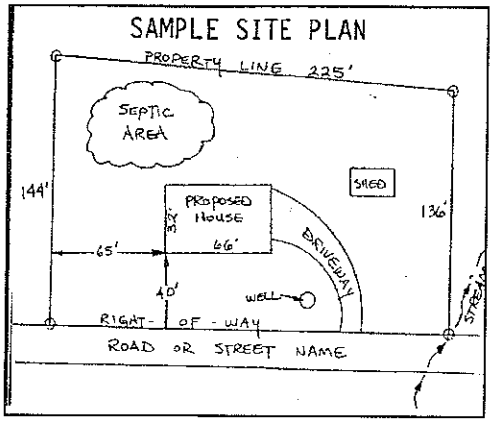
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: ***SITE PLAN WORKSHEET***

SEE THE "SAMPLE SITE PLAN" BELOW. ***INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

( ) **Property Line measurements are clearly identified**
( ) **All proposed structures are indicated**
( ) **Front and side setbacks from property line**
( ) **Preferred driveway location and well location**
( ) **Area you prefer your septic system to be placed**
( ) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

See Attached

Signature: _____ _____ 6/25/14

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

THIS PERMIT VOIDS PREVIOUS ISSUE

IREDELL COUNTY HEALTH DEPARTMENT STATESVILLE 704-878-5305 MOORESVILLE

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

PERMIT# 23888 PIN# PART OF 10B-A-55

OWNER OR CONTRACTOR C. DOUGLAS MADISON, JR PHONE: Business 873-0521 Home

ADDRESS 1805 SAFRIET ROAD, STATESVILLE, NC 28677

LOCATION US 21 N, TR JANE SOWERS, TR GREEN MEADOWS LANE, 6TH LOT ON LEFT (AT C

SUBDIVISION ROLLING MEADOWS BLOCK / SECTION LOT 8 LOT AREA 26,232 SF SITE CLASS PS DESIGN FLOW 360

Septic Tank: 1000 Gallons; STB 1017 Date 4-26-99 | System Type: I, II, III, IV, V, VI | House/Mod. Home

Pump Tank: Gallons; PT Date | System Description: CHAMBER BED SERVING | Mobile Home

Pump Make: Model Serial No. | Repair System Description: PPBFS SERVING | Business

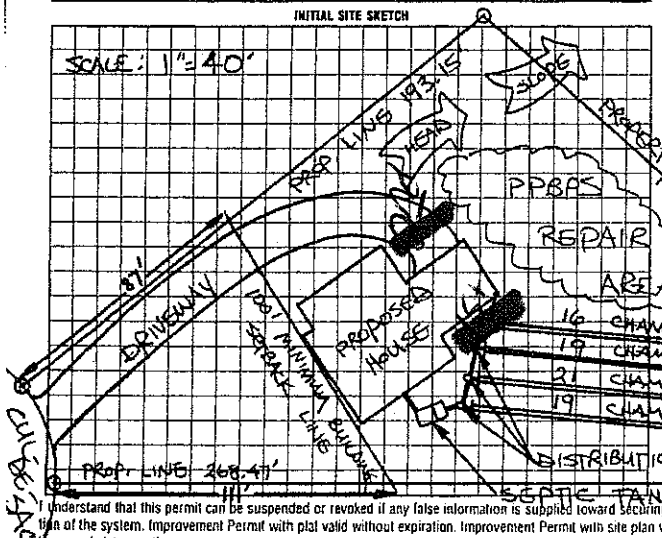
Nitrification Field: No. Fields 1 Square Feet 1500 to 1800 Linear Feet 450+ | Maintenance Agreement Required: Yes No | Other

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Depth SAND 6" | Slab Crawl Space Basement w/plumbing

Comments/Conditions: INSTALL 75 CHAMBERS (AT OWNER'S REQUEST) IN FOUR LINES ON CONTOUR AS SHOWN

Comments/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as shown

I understand that this 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 unauthoriz tion 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 exceed sixty months.

Signed: Mike Watts date 9-9-98 Installed by: Tommy Frye

Improvement Permit by: STEVE HEDRICK date 8-26-98 Operation Permit by: Mt Cont Rs

Authorization to Construct by: STEVE HEDRICK date 8-26-98 Existing System Inspection by:

HEALTH DEPT. COPY WHITE INSPECTION COPY (FINAL) GREEN OWNER COPY (FINAL) YELLOW INSPECTION COPY (INITIAL) PINK OWN