IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 157353 PIN # 4756423504 DATE 7-16-09

OWNER or APPLICANT PAUL TURNER PHONE: Business 704-400-6007 Home: 704-873-2671

OWNER or APPLICANT ADDRESS 254 Brookview Rd Statesville NC 28625

LOCATION / DIRECTIONS 21 N (L) JANE SOWERS (R) Crawford (L) Brookview Rd at Box # 254

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 2.18 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 3 Linear Feet 400'

Trench Width 36" Max. Trench Bottom Depth Gravel Depth 12"

☐ New System ☐ Repair ☐ Expansion System Type I (II) III IV V VI

System Description: GRAVITY CONVENTIONAL

Repair System Description:

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions (1) Adding a detached building with no living quarters. Bathroom shower is allowed and flow is not changing. (2) NO SIBWS OR Failure at time of check.

Comments / Conditions (3) Supply lines have to enter tank in 2 locations unless engineer design is submitted.

INITIAL SITE SKETCH

SEE ATTACHED EXISTING SYSTEM CHECK BY LOWE CONK, R.S

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date 7/20/09

Improvement Permit by: Date

Authorization to Construct by: Date

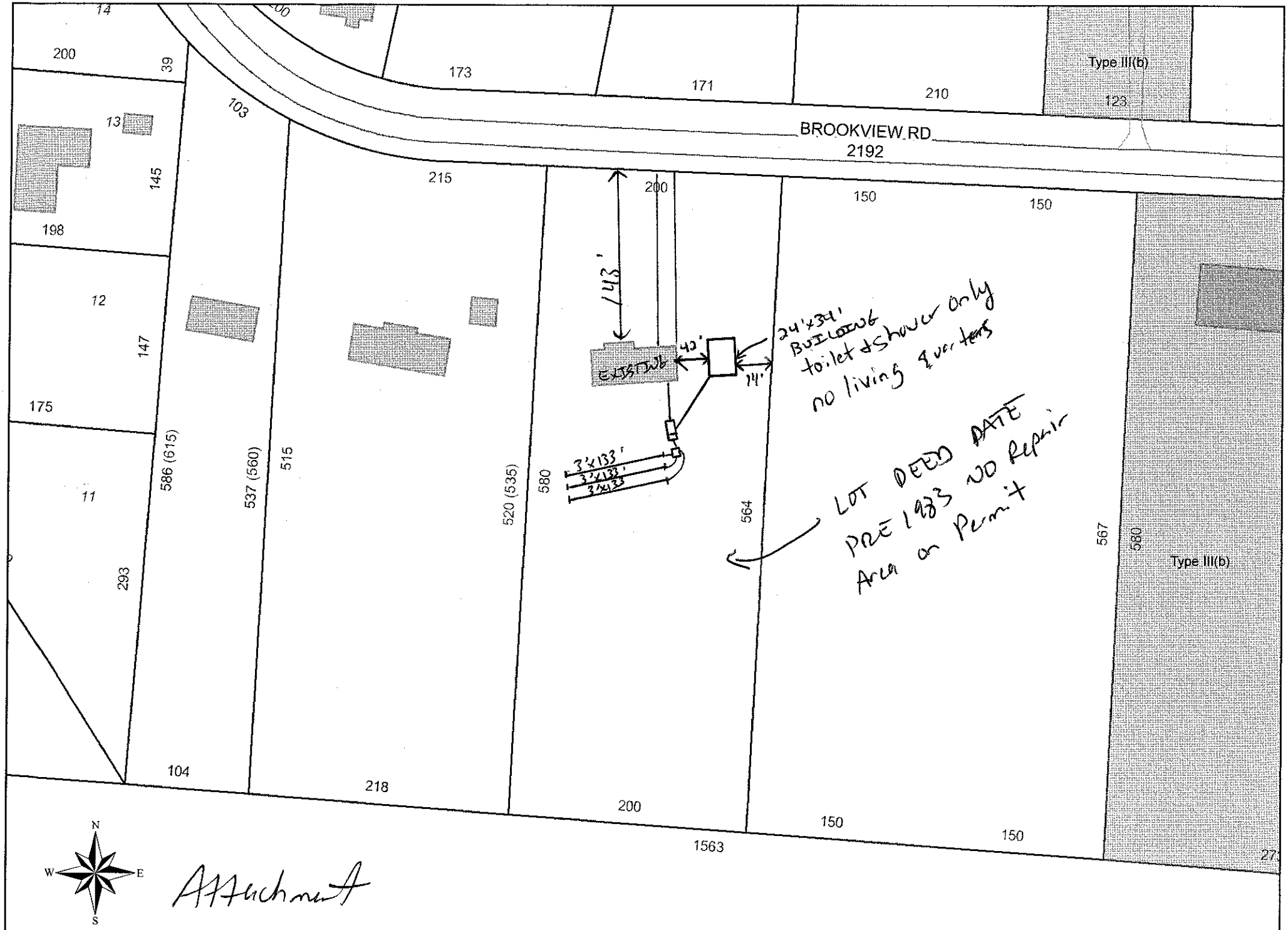
YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by:

Operation Permit by: Date:

Existing System Inspected by: [signature] Date: 7-16-09

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant


BROOKVIEW RD
2192
Type III(b)
123
14
200
39
173
171
210
13
103
145
215
200
150
150
198
12
147
175
148'
24'x34'
BUILDING
toilet & shower only
no living quarters
40'
14'
EXISTING
3'x133'
3'x133'
3'x133'
LOT DEED DATE
PRE 1983 NO Repair
Area or Permit
11
586 (615)
537 (560)
515
520 (535)
580
564
567
580
Type III(b)
293
104
218
200
150
150
1563
N
W
E
S
Attachment
1 inch = 100 feet