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# 4756-72-8167 DATE 10-3-03

OWNER OR CONTRACTOR JOHNNY FRANKLIN ATWELL PHONE: Business _____ Home 704-873-4129

ADDRESS 120 WHITE FOX TRAIL, STATESVILLE, NC 28625-9565

LOCATION OLD MOCKSVILLE ROAD, TR WHITE FOX TRAIL, 2ND DRIVE ON RIGHT AT #120

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.0 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 300 Linear Feet 100

No Lines ONE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 18"

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

System Description: _____

Repair System Description: CONVENTIONAL, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

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

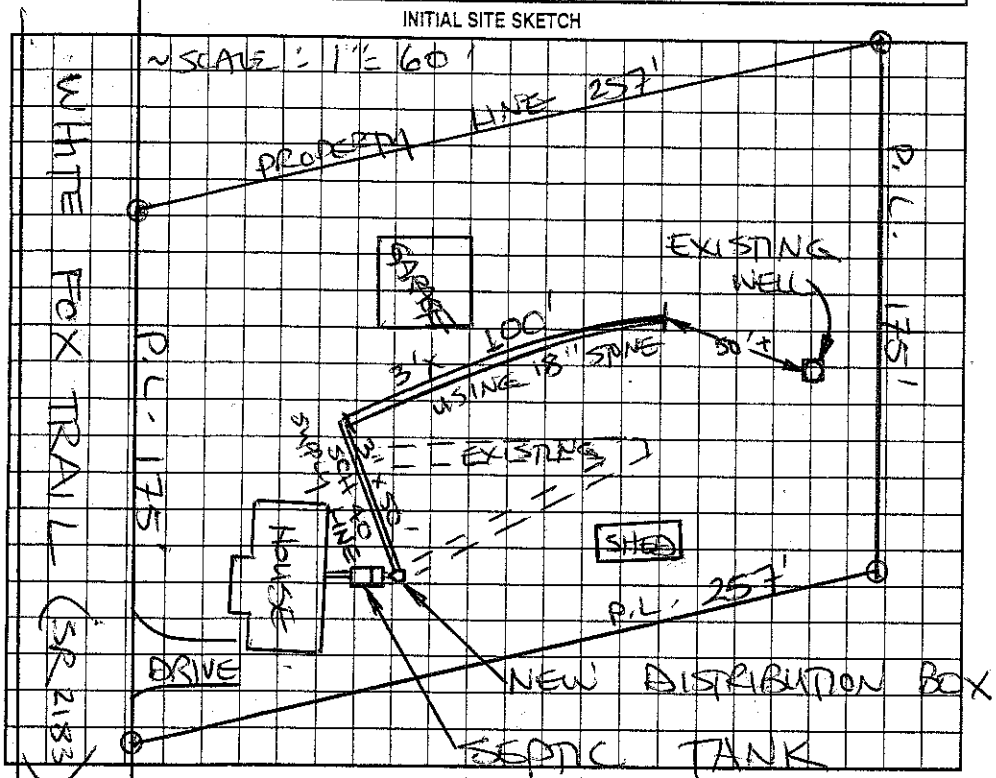
Water Supply: ☑ Individual ☐ Public ☐ Community

WELL

Comments:/Conditions: INSTALL NEW DISTRIBUTION BOX AT LOCATION SHOWN FEEDING OLD LINE FIRST, THEN NEW LINE SECOND AT 3'x100' USING 18" STONE

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED ACCORDING TO INITIAL SITE SKETCH

(1)

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: +Johnny Atwell date 10-3-03 Installed by: JAMES HUDER

Improvement Permit by: STEVE HEDRICK date 10-3-03 Operation Permit by: STEVE HEDRICK date 10-7-03

Authorization to Construct by: STEVE HEDRICK date 10-3-03 Existing System Inspection by: _____ date _____

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