BF 11:45

IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224913

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

PIN # 4757066954

APPLICANT: Adam Blackwelder APPLICANT ADDRESS: 121 Westcott Drive Statesville NC

SITE ADDRESS: 236 Reeves Road Statesville NC 28625 PHONE: 704 902 0136 ALT. PHONE: 704 880 1987

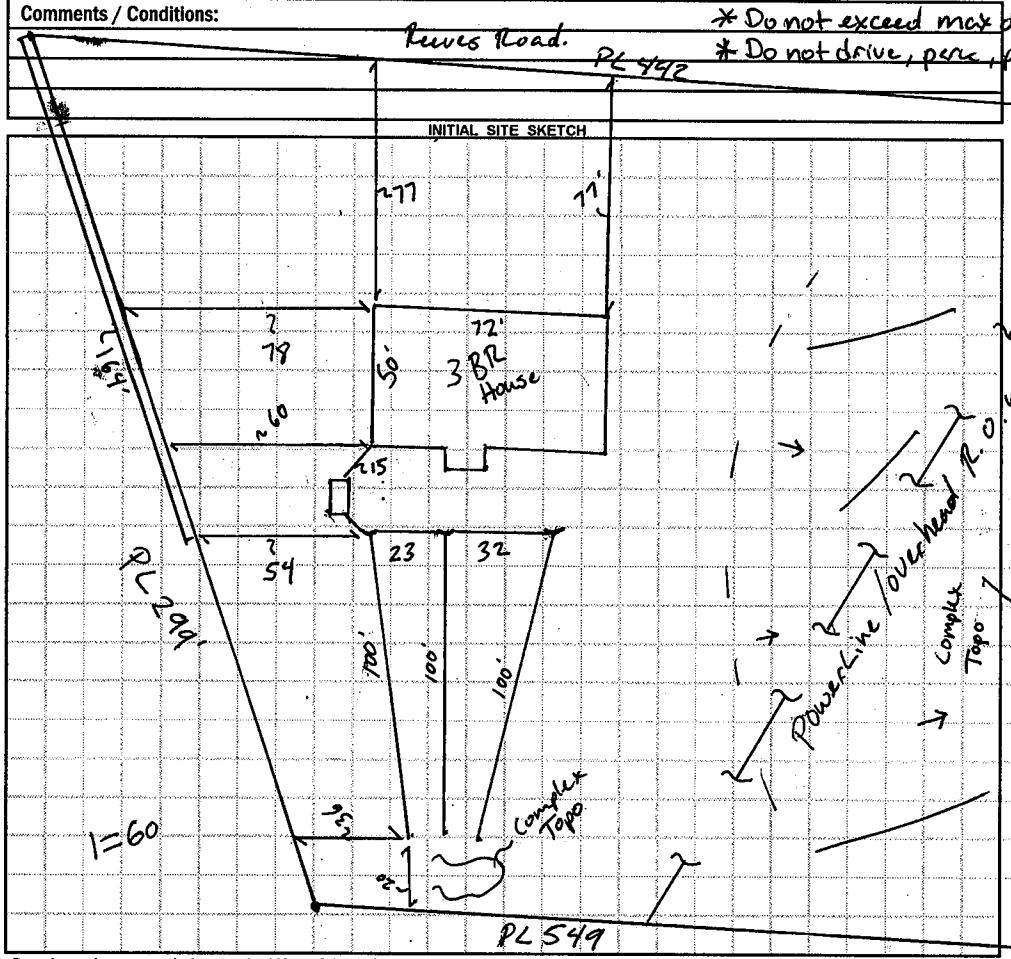
SITE DIRECTIONS: I-77 North exit 54, Right on 21 Left on Jennings, Right on Reeves Property after 214 on Right

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 3.824 Acres DESIGN FLOW: 360 gpd L.T.A.R.: .30 LTAR

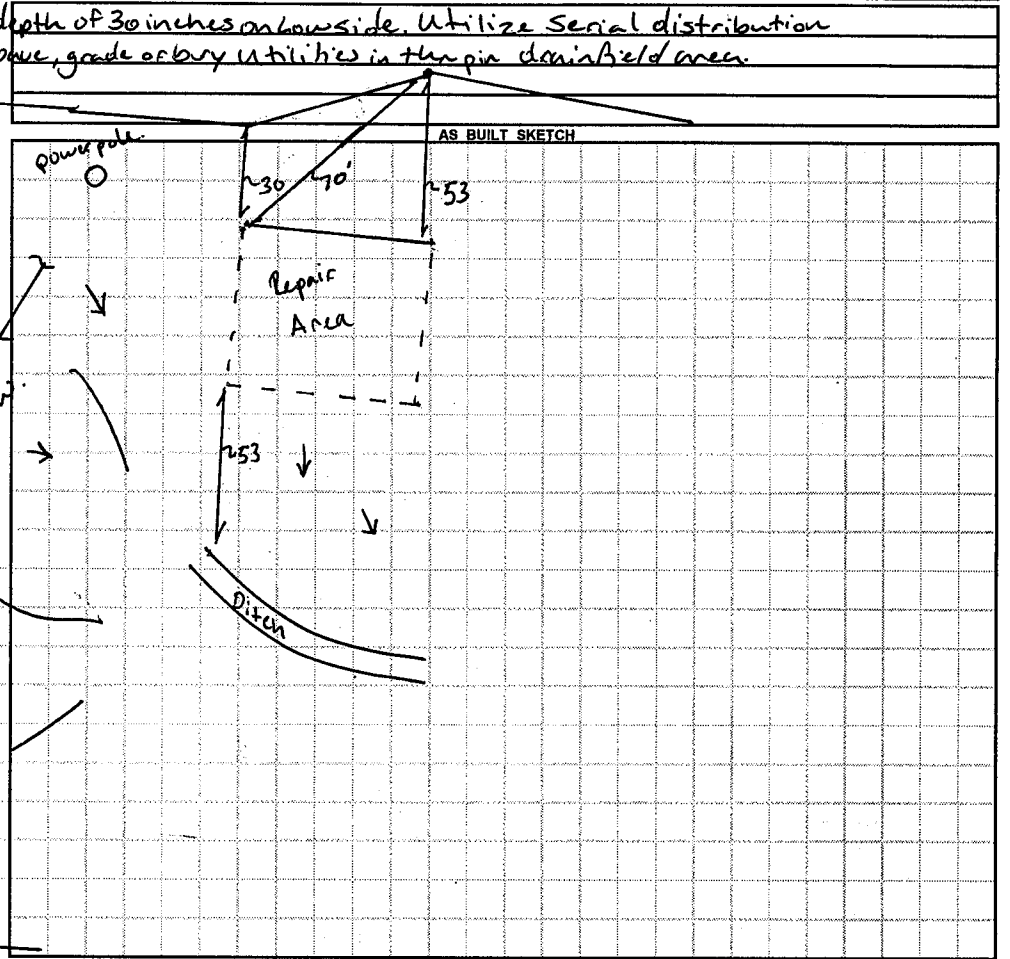
Septic Tank	1000	(gal)	STB	760	Date	3/28/17	☒ New System ☐ Repair ☐ Expansion	System Type: I II ◉ IV V VI	☒ Residence	No. Bedrooms	3	Water Supply
Pump Tank	—	(gal)	PT	—	Date	—	System Description:	25% reduction	☐ Business	No. Persons	6	☐ Private
Pump Make	—		Model	—	Serial #	—	Repair System Description:	25% reduction	☐ Other	No. Employees		☒ Public
# Nitrification Fields	1	# Lines	3	Linear Ft:	300	Maintenance Agreement Required:	☐ YES ☒ NO		☐ Slab	☒ Crawl Space		☐ Community
Trench Width	36	Max. Trench Bottom Depth	30in Lowside	Gravel Depth	—		☒ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: * Do not exceed max depth of 30 inches on lowside. Utilize Serial distribution
* Do not drive, park, pave, grade or bury utilities in the primary drainfield area.

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: ABB Date: 5/11/17 Installed by: Shannon - Groundbreakers

IMPROVEMENT PERMIT by: Benjamin A. Botkins Date: 4/9/17 OPERATION PERMIT by: Benjamin A. Botkins Date: 5/19/2017

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Botkins Date: 4/9/2017 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK