IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 128531 PIN# 4775 80 7509 DATE 7-6-05

OWNER OR CONTRACTOR Mary Mills PHONE: Business Home 704-871-8627

ADDRESS 325 Warren Glen Mill Rd Statesville 28625

LOCATION JANE Sowers RD (L) Baymont (L) Baymont Acres (R) Burton Place end

SUBDIVISION Baymont BLOCK / SECTION LOT LOT AREA 1 acre SITE CLASS. 15 DESIGN FLOW 100 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825-1000 Date 6-15-05

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet 334 Linear Feet ~~400~~ 90

No Lines 2 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Con Sanit

Repair System Description: Conv. Gravity

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other Barn

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

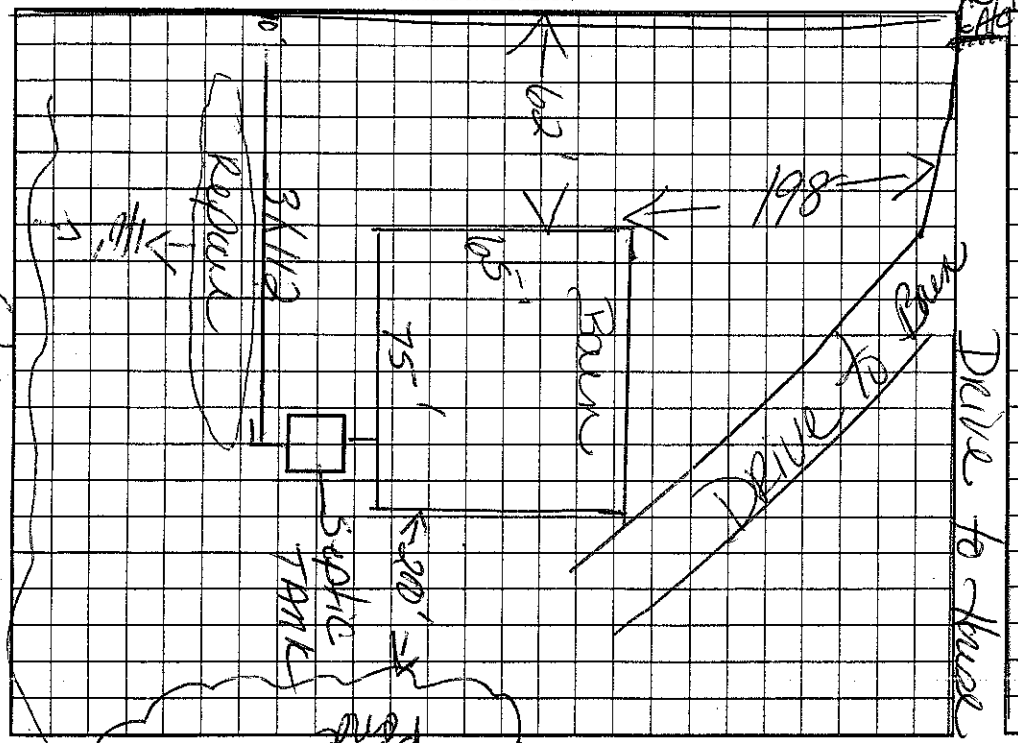
Water Supply: ☐ Individual ☐ Public ☐ Community

Comments:/Conditions:

36" trench - Depth

1" = 50'

INITIAL SITE SKETCH



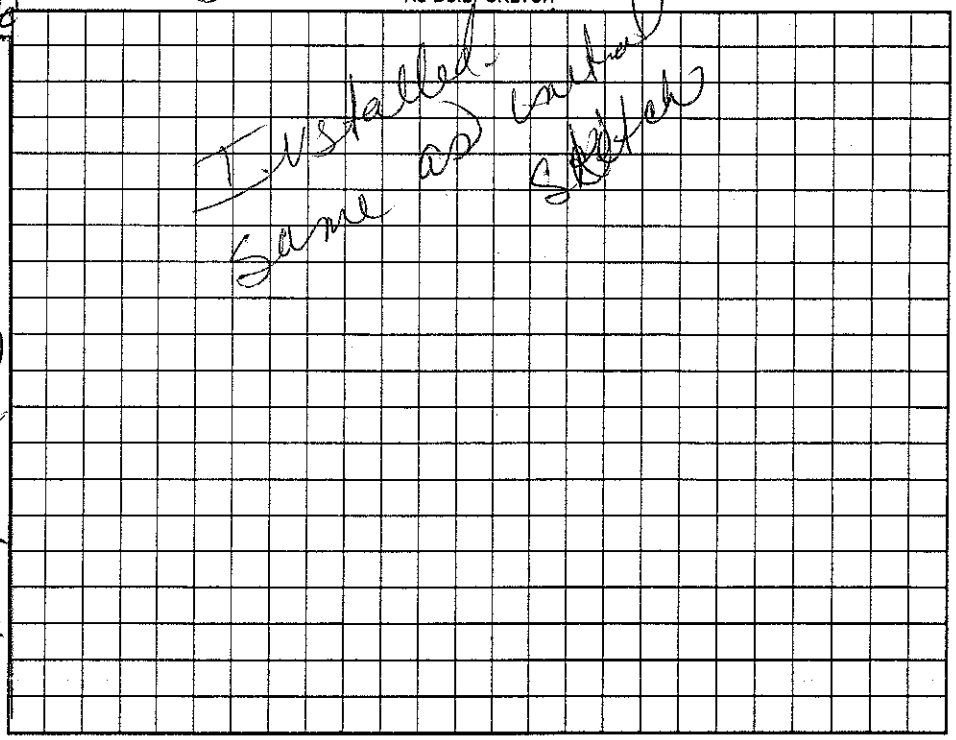
Comments:/Conditions: 25% Reduction installed

90' of E-Z Flow polystyrene installed

Septic tank marker installed

Blue poly lock lid installed on tank

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 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: Mary L Mills date 7-7-05 Installed by: Andy Daniels

Improvement Permit by: Kelly Cox date 7-6-05 Operation Permit by: Kelly Cook date 7-25-05

Authorization to Construct by: Kelly Cox date 7-6-05 Existing System Inspection by: date

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