IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (2) MOORESVILLE 704-664-5281

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

(1)

PERMIT# 120502 PIN# 4758-18-2970-7605 DATE 5-3-04

OWNER OR CONTRACTOR JAMES C. CHURCH PHONE: Business 704-902-4778 Home 704-876-1625

ADDRESS 290 MITCHELL FARM ROAD, STATESVILLE, NC 28625

LOCATION US21 NORTH, TL FAIRMOUNT CH. ROAD, TL MITCHELL FARM ROAD, 0.4 MILE ON RIGHT.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA ~1.0 ACRE SITE CLASS. PS DESIGN FLOW 360' L.T.A.R. 0.40 GAD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-6-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No. Fields 1 Square Feet 900 Linear Feet 300
No. Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

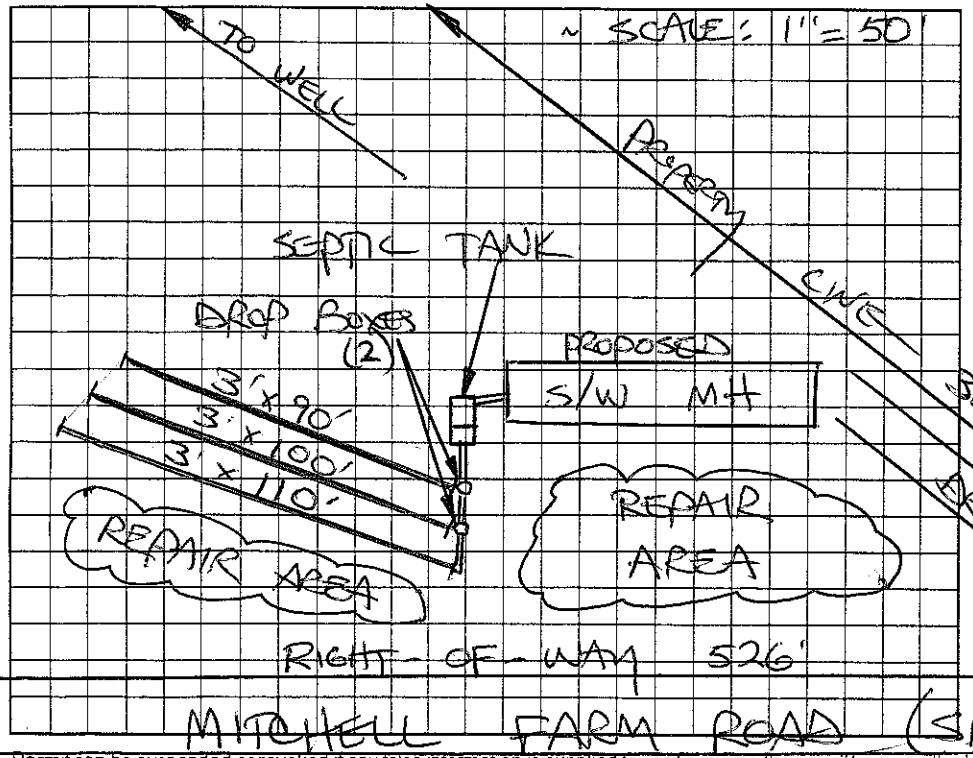
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Public
☐ Community
WELL NEXT DOOR

Comments:/Conditions: KEEP SYSTEM MINIMUM 100' FROM WELL

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: Adam Harris date 5-3-04 Installed by: PIEDMONT BACKHOE

Improvement Permit by: STEVE HEDRICK date 5-3-04 Operation Permit by: STEVE HEDRICK date 6-1-04

Authorization to Construct by: STEVE HEDRICK date 5-3-04 Existing System Inspection by: _____ date _____

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