IREDELL COUNTY HEALTH DEPARTMENT

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

(b)

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

PERMIT# 128259 PIN# 4758-80-3061 ~~7003~~ 2031 DATE 6-30-05

OWNER OR CONTRACTOR GARY R. WOOTEN PHONE: Business _____ Home 704-876-2520

ADDRESS 113 BLACKWELDER RD, STATESVILLE NC 28625-2549

LOCATION US 21 NORTH, TL BLACKWELDER ROAD, MTON LEFT BEHIND BOX # 113, 300' BACK

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 4.687 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.140 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 3-22-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No. Fields 1 Square Feet 900 Linear Feet 300
No Lines FOUR 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

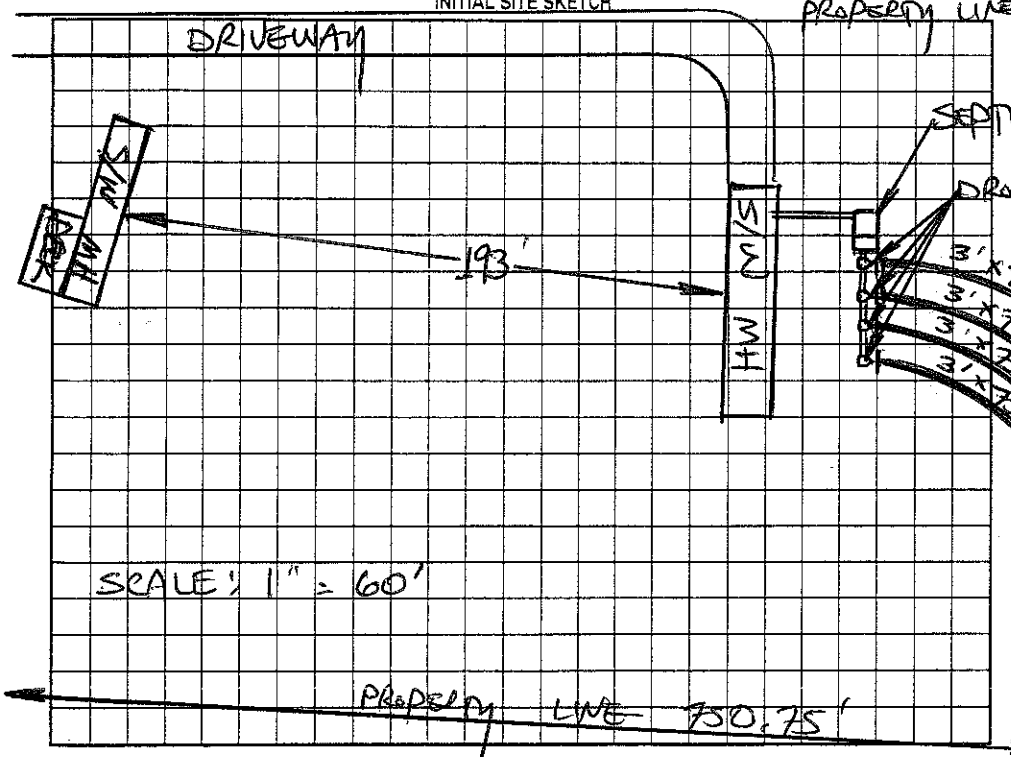
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: INSTALL DRAINLINES ON CONTOUR, AN "ACCEPTED" SYSTEM MAY ALSO BE USED.

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

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE SKETCH USING 56 "QUICK4" INFILTRATOR CHAMBERS

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: Gary R. Wooten 6/30/05 date _____ Installed by: BRENT GALLIHER

Improvement Permit by: STEVE HEDRICK date 6-30-05 Operation Permit by: STEVE HEDRICK date 8-2-05

Authorization to Construct by: STEVE HEDRICK date 6-30-05 Existing System Inspection by: _____ date _____

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