# IREDELL COUNTY HEALTH DEPARTMENT

CALLED IN

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

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

PERMIT# 126746 PIN# 4763-23-6068.00A 9214 DATE 4-6-05

OWNER OR CONTRACTOR JONNA MURNICK PHONE: Business 704-737-6131 Home 704-924-6827

ADDRESS 270 NABORS ROAD STATESVILLE, NC 28677

LOCATION US 70 EAST, TR NABORS ROAD, 0.4 MILES, TR PRIVATE DRIVEWAY (#193), 1100 FEET BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.587 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1000 Gallons; ST8 794 Date 11-30-05

Pump Tank: 1000 Gallons; PT 27 Date 1-20-05

Pump Make: GOULDS Model 3E05111HF Serial No. K856634?

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533

No Lines FIVE 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, PUMP

Repair System Description: CONVENTIONAL, PUMP

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

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

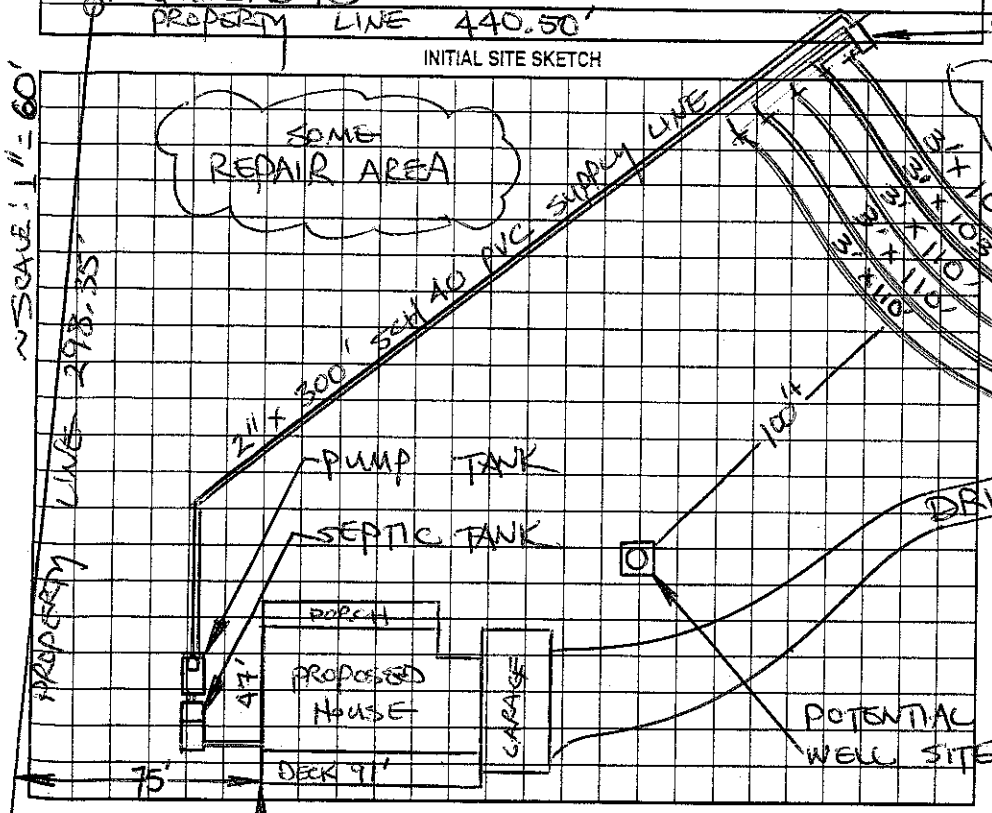
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

Comments/Conditions: ① KEEP SYSTEM MINIMUM 100 FEET FROM WELL ② SEE ATTACHED SHEETS FOR PUMP & PRESSURE MANIFOLD REQUIREMENTS

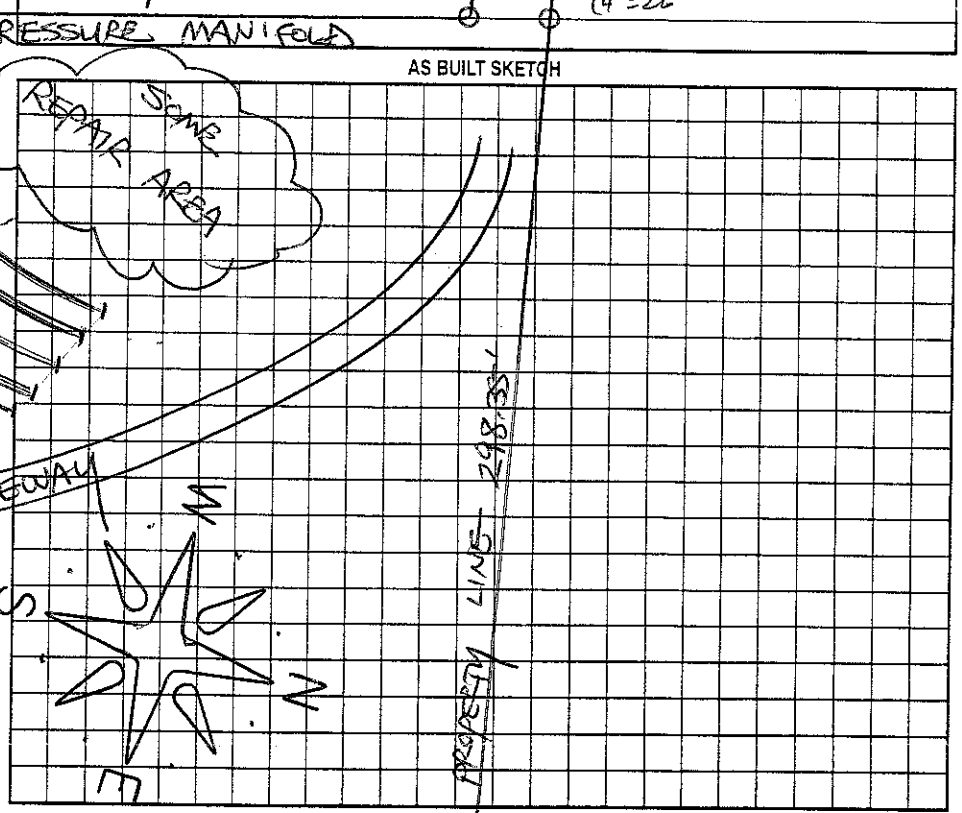
Comments/Conditions: Red Polylock Tank w/p riser w ST mark

L1 = 24
L2,3 = 25
L4 = 26

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. 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: 1" = 60' Rex Bell date 4-6-05 Installed by: Marty Tucker

Improvement Permit by: STEVE HEDRICK date 4-6-05 Operation Permit by: _____ date 1-27-06

Authorization to Construct by: STEVE HEDRICK date 4-6-05 Existing System Inspection by: _____ date _____

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