IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4763-61-8017 DATE 12-7-01

OWNER OR CONTRACTOR MICHAEL J. SIGEMAKER PHONE: Business Home (704) 878-8805

ADDRESS 175 ARBOR DRIVE STATESVILLE, NC 28677

LOCATION US 70 EAST, TR BETHESDA RD, TL TREE LINE, TR ARBOR DRIVE, LOT AT END ON LEFT

SUBDIVISION FOREST ACRES BLOCK / SECTION ____ LOT 135 LOT AREA LIMITED SITE CLASS. PS1 DESIGN FLOW 240 L.T.A.R. 0.4 (EXISTING)

Septic Tank: EXISTING Gallons: STB ____ Date ____

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields ____ Square Feet 600 to 600 Linear Feet 100

No Lines TWO Trench Width 24" Max Trench Bottom Depth 36 +/- Gravel Depth SAND 6"

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

System Description: 50% REDUCTION GRAVITY

Repair System Description: 50% REDUCTION GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 2 No. Bathrooms 2 No. Employees ____

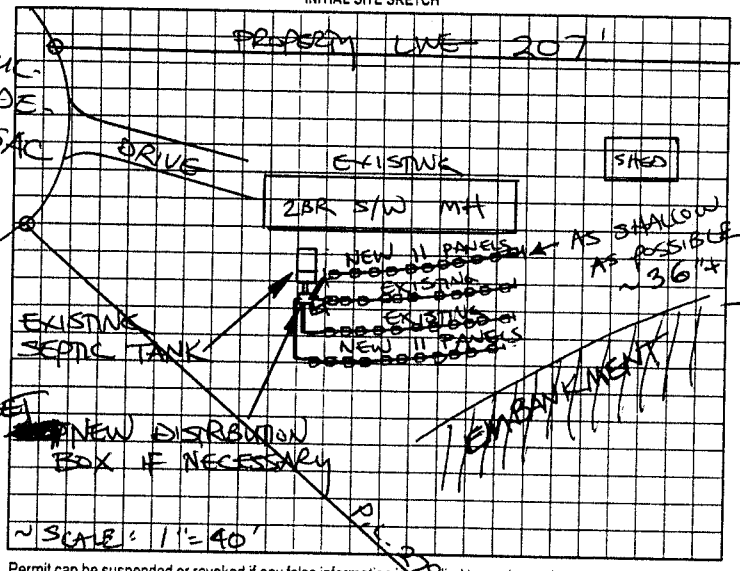
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

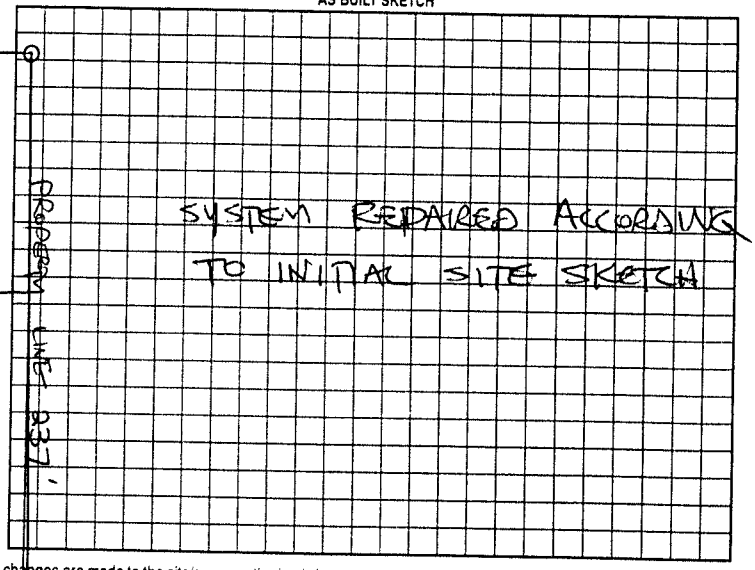
Comments/Conditions: ① THIS PERMIT SERVES AS "NOTICE OF VIOLATION", SYSTEM TO BE REPAIRED BY JAN 7, 2002 ② INSTALL 50% REDUCTION REPAIR USING TWENTY-TWO (22) PPBPS PANELS AS SHOWN

Comments/Conditions:

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: X [signature] date 12-7-01

Improvement Permit by: STEVE HEDRICK date 12-7-01

Authorization to Construct by: STEVE HEDRICK date 12-7-01

Installed by: STEVE JORDAN

Operation Permit by: STEVE HEDRICK date 12-10-01

Existing System Inspection by: ____ date ____

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