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# 4763-72-4681 DATE 8-29-03

OWNER OR CONTRACTOR ROBERT PRESTON WILLIAMS PHONE: Business 704-528-7505 Home 5kr-7559

ADDRESS 109 APRICOT LANE, STATESVILLE, NC 28677

LOCATION US 70 EAST, TR MOREHEAD ROAD, TR OLD WELLHOUSE RD, TL APRICOT LANE, 1ST DRIVE ON LEFT

SUBDIVISION FOREST ACRES BLOCK / SECTION IV LOT 191/192 LOT AREA 0.91 ACRE SITE CLASS. PS' DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet ____ Linear Feet EXISTING

No Lines THREE Trench Width ____ Max Trench Bottom Depth ____ Gravel Depth ____

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

System Description: CONVENTIONAL, GRAVITY

Repair System Description: ____

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

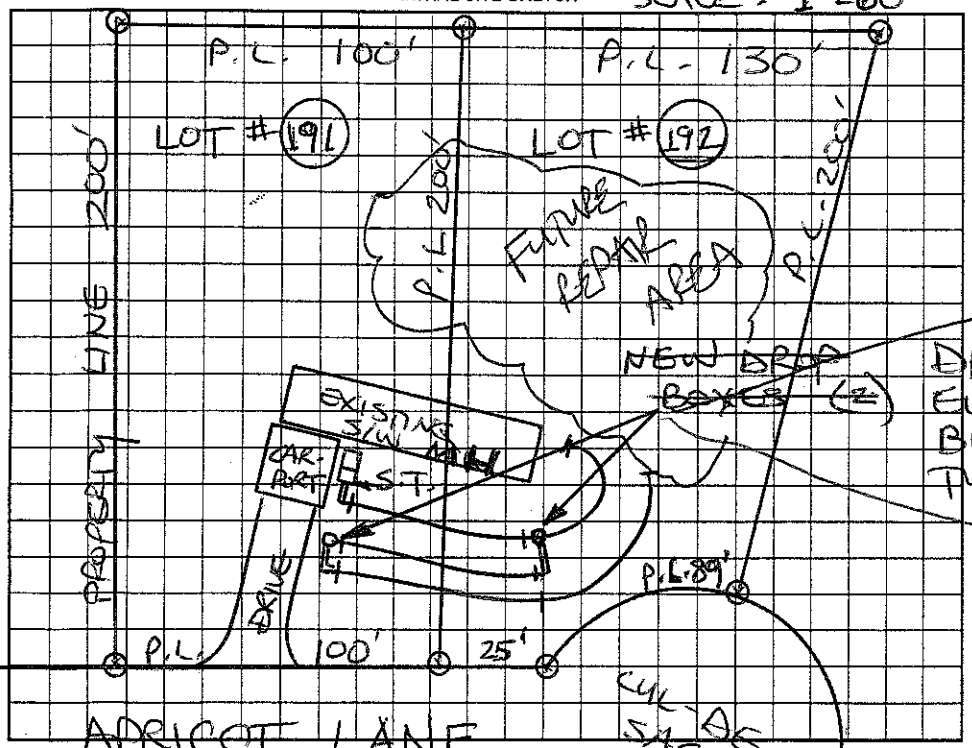
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

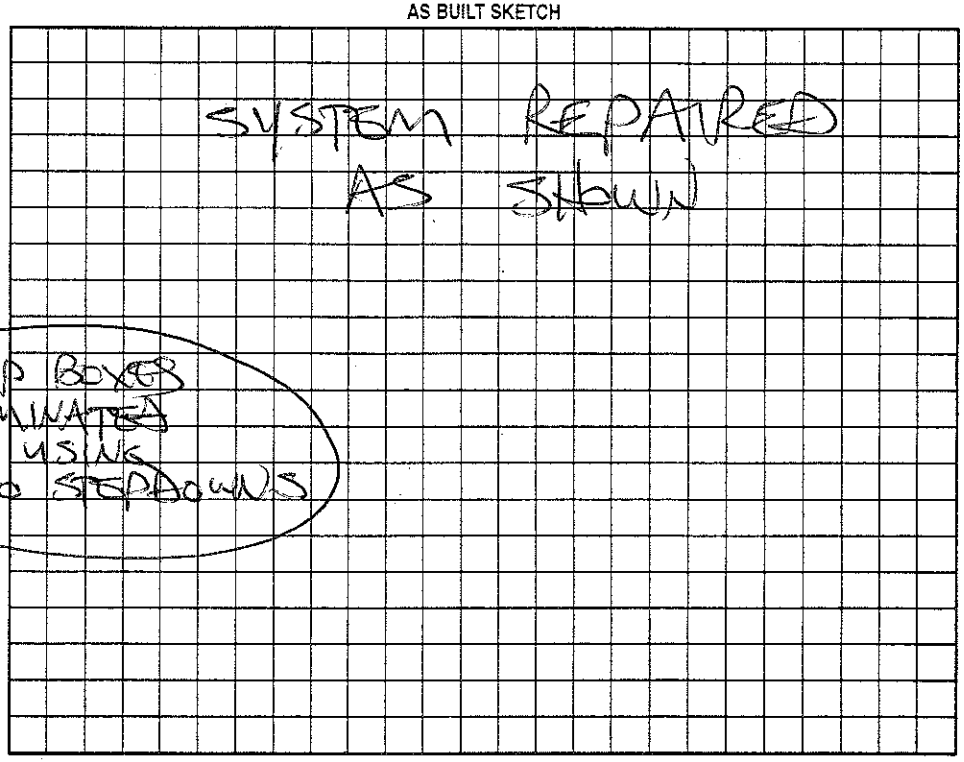
Comments:/Conditions: REMOVE EXISTING DISTRIBUTION BOX AND DIRECTLY CONNECT 1ST (UPPER) LINE USING 3" SCH 40 PVC. INSTALL TWO NEW DROP BOXES AT LOCATIONS SHOWN FEEDING 2ND & 3RD LINES SERIALLY

Comments:/Conditions: THIS PERMIT SERVES AS "NOTICE OF VIOLATION." SYSTEM TO BE REPAIRED BY 9-30-03

INITIAL SITE SKETCH SCALE: 1"=60'



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 Robert Preston Williams date 8-29-03

Improvement Permit by: STEVE HEDRICK date 8-29-03

Authorization to Construct by: STEVE HEDRICK date 8-29-03

Installed by: JAMES HYDER

Operation Permit by: STEVE HEDRICK date 9-15-03

Existing System Inspection by: ____ date ____

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