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# 4765-52-3320 DATE JULY 3, 03

OWNER OR CONTRACTOR J. KENNETH GRANT PHONE: Business 704-873-2807 Home 704-902-4708

ADDRESS 1301 W. FRONT STREET, STATESVILLE, NC 28677

LOCATION US 64 E TR BELL FARM RD TL MAPLE LEAF, TR BIRCHWOOD TL SWEETGUM 1ST ON RIGHT

SUBDIVISION CEDAR HILLS BLOCK / SECTION ____ LOT 37 LOT AREA LIMITED SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: 1000 / 1060 Gallons; STB 620 Date 6-4-63

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

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

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

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

System Description: ____

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1½

☐ Business No. Employees ____

☐ Other ____

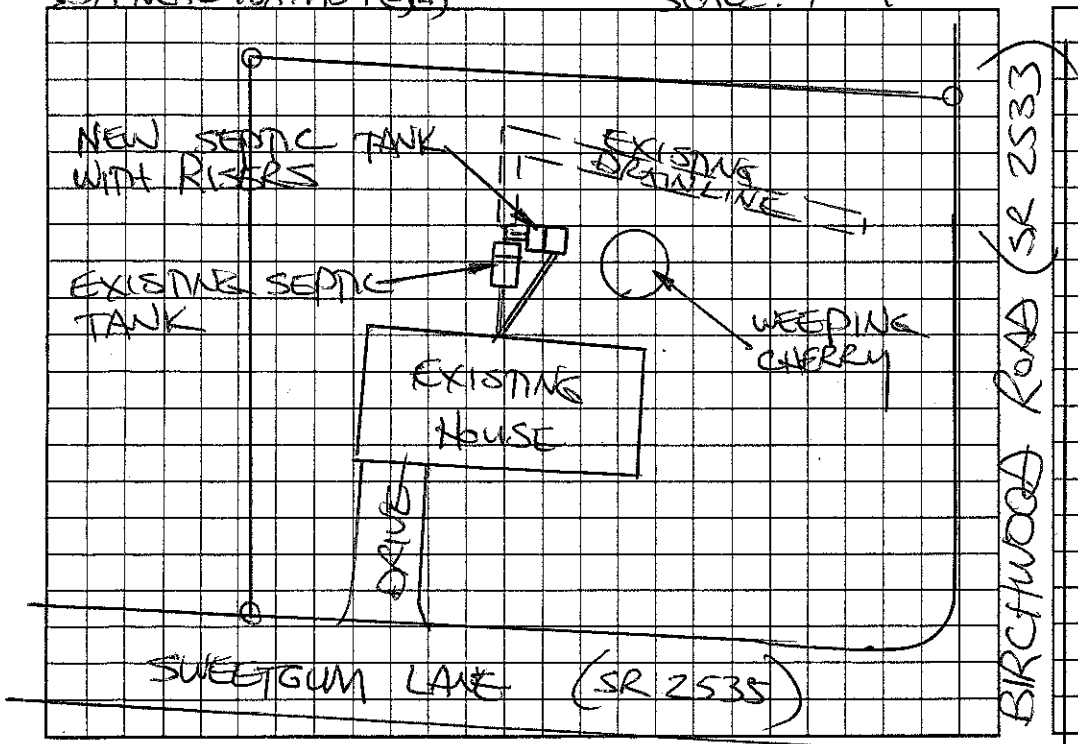
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

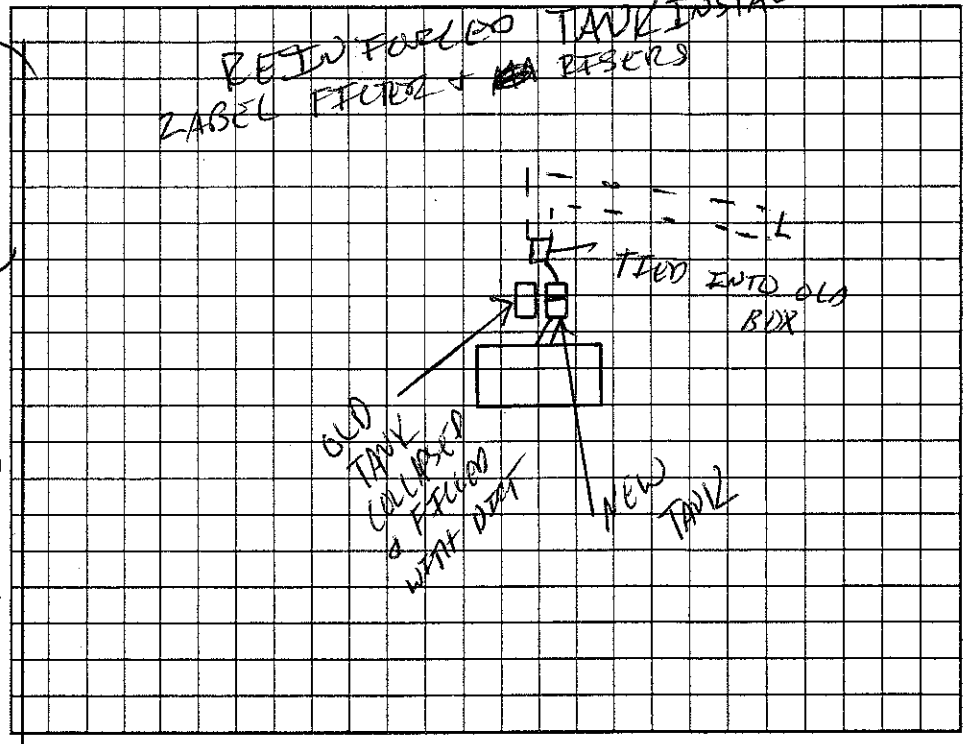
Comments:/Conditions: REPLACE EXISTING SEPTIC TANK WITH NEW ONE WITH ADDITIONAL REINFORCEMENT IF TOP OF TANK IS PLACED DEEPER THAN THREE FEET BELOW FINISHED GRADE

Comments:/Conditions: THIS PERMIT SERVES AS "NOTICE OF VIOLATION", TANK TO BE REPLACED BY 8-3-03

15A NCAC 18A .1954 (a)(4) INITIAL SITE SKETCH SCALE: 1" = 40'



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: [signature] date 07-03-03 Installed by: SAMMY REAVIS

Improvement Permit by: STEVE HEDRICK date 7-3-03 Operation Permit by: [signature] date 7-23-03

Authorization to Construct by: STEVE HEDRICK date 7-3-03 Existing System Inspection by: ____ date ____

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