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 # 4765-52-7879 DATE 13 April 10

OWNER or APPLICANT ~~Bob Hayden~~ ADAM LEONARD PHONE: ~~Business~~ Cell (704) 437-6250 Home:

OWNER or APPLICANT ADDRESS 173 Maplelawn Rd. Statesville

LOCATION / DIRECTIONS Hwy 64E TR Bell Farm TL Maplelawn Rd. Lot on Rt.

SUBDIVISION Cedarhill BLOCK / SECTION LOT # 57 LOT AREA .6 ac DESIGN FLOW 360 gpd L.T.A.R. 0.3 1.7 Acpd

Septic Tank Exist. Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 3 Linear Feet 100

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth NA ☑ GRAVITY ☐ PRESSURE

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

System Description:

Repair System Description: 25% Reduction

Maintenance Agreement Required ☐ YES ☑ NO

☑ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

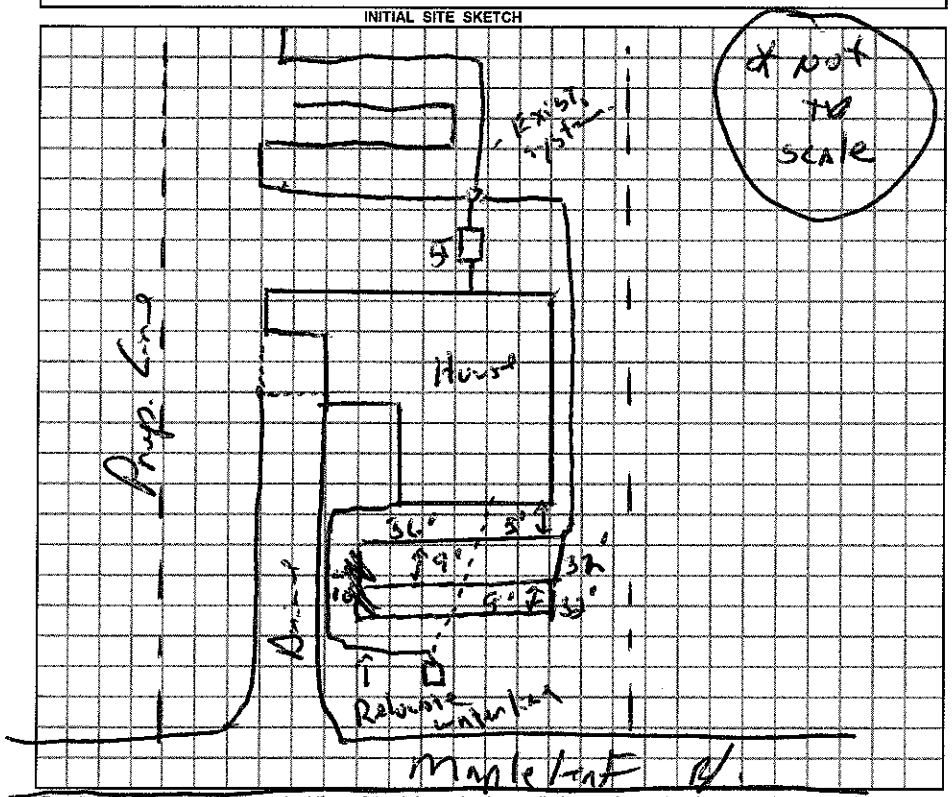
Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions

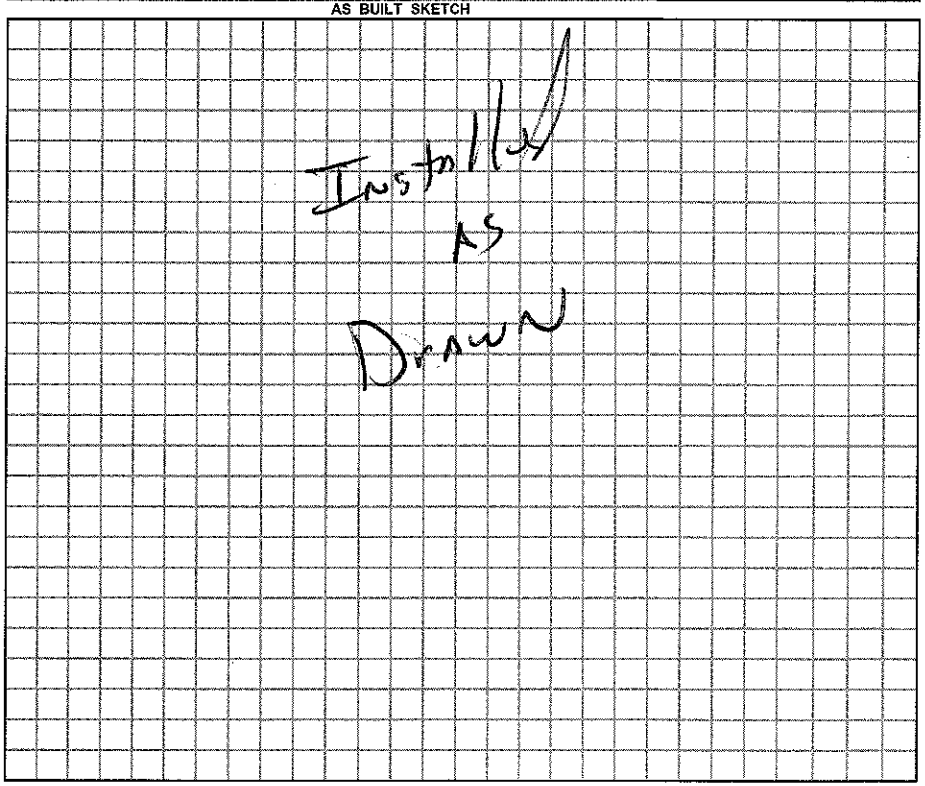
+ Add 100 Ft. 25% Reduction to Exist. System. Relocate water line to area beside driveway. Keep system 10' from waterline.

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☑ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Adam Leonard Date 4/13/10

Improvement Permit by: Date

Authorization to Construct by: R.S. Date 13 April 10

Installed by: Rowan Septic

Operation Permit by: , R.S. Date: 21 April 10

Existing System Inspected by: Date:

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant