IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 104885 PIN# 4766-72-8839 DATE 03-11-02

OWNER OR CONTRACTOR KENNY WATT PHONE: Business 704-902-0119 Home 704-902-4495

ADDRESS 630 SIGNAL HILL EXT, STATESVILLE NC 28625

LOCATION HWY 64E, (L) OLD MOCKSVILLE RD, (R) CHESTNUT GROVE, (R) 2ND 7 SPRINGS LOOP, LOT 81 ON RT

SUBDIVISION 7SPRINGS BLOCK / SECTION ______ LOT 81 LOT AREA .95 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1012 Date 5-10-02
Pump Tank: ______ Gallons; PT ______ Date ______
Pump Make: ______ Model ______ Serial No ______
Nitrification Field: No Fields 1 Square Feet ED=1440' Linear Feet 360'
No Lines 3/SPLIT Trench Width 36" Max Trench Bottom Depth (24")

[X] New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: GRAY 25% RED
Repair System Description: GRAY 25% RED / PUMP LP ...
Maintenance Agreement Required: ☐ Yes [X] No
Gravel Depth N/A

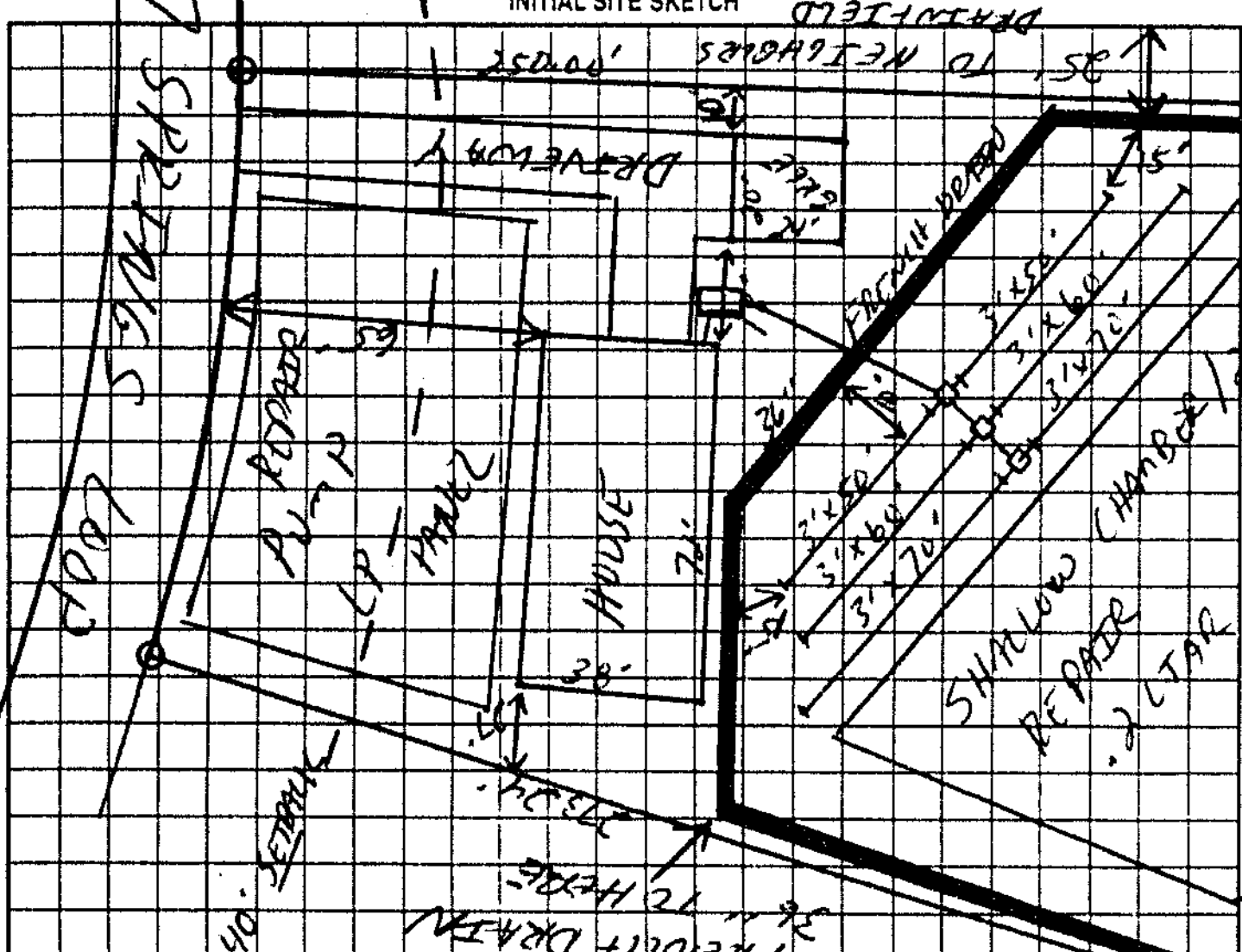
[X] House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees ______
☐ Slab [X] Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual [X] Public ☐ Community

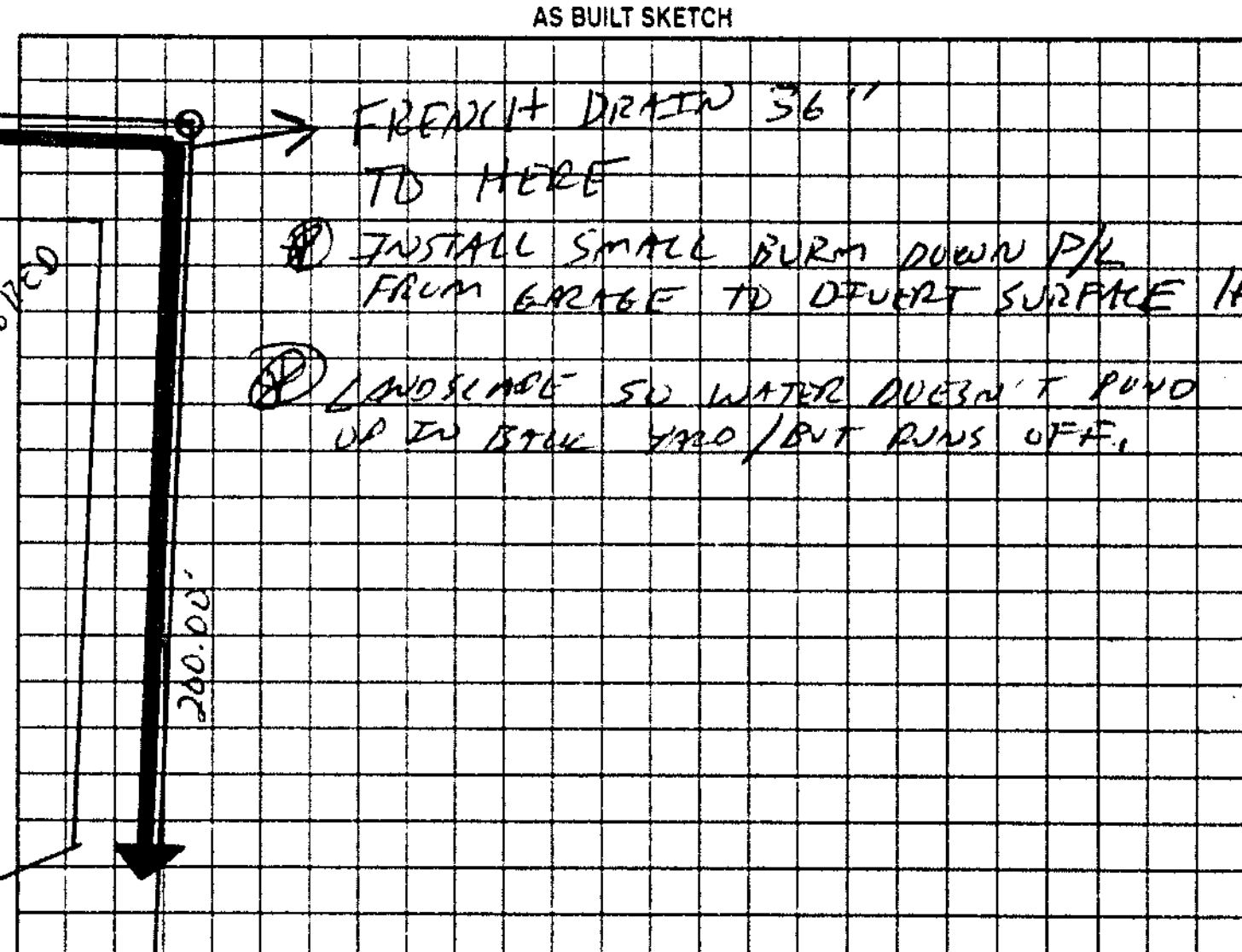
Comments:/Conditions: (1) GARAGE IS 8' BACK OFF HOUSE (2) KEEP SEPTIC TANK 25' UPSLOPE FROM FRENCH DRAIN (3) MAINTAIN SETBACKS

Comments:/Conditions: POLYLOK FILTER & MARKER INSTALLED AS SHOWN

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: Kenneth Watt date 7-8-02 installed by: DAVID YOUNTZ

Improvement Permit by: [signature] RS date 07-03-02 Operation Permit by [signature] RS date 7-24-02

Authorization to Construct by: [signature] RS date 07-03-02 Existing System Inspection by: ______ date ______

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