IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122368 PIN# 4766-72-9108 DATE 7-9-04

OWNER OR CONTRACTOR KENNETH E. WILCOX PHONE: Business % 704-278-4737 Home 704-873-3449

ADDRESS 289 SEVEN SPRINGS LOOP, STATESVILLE NC 28625

LOCATION OLD MOCKSVILLE ROAD, TR CHESTNUT GROVE ROAD, TR SEVEN SPRINGS LOOP, FAR END OF LOOP AT #289

SUBDIVISION SEVEN SPRINGS BLOCK / SECTION II LOT 28 LOT AREA 2.41 ACRES SITE CLASS. PS DESIGN FLOW 300 L.T.A.R. 0.25 GAD/SQ FT

Septic Tank: 1000 Gallons; STB 525 Date 5-20-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet EQ. P 400 Linear Feet 100
No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 25% REDUCTION, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

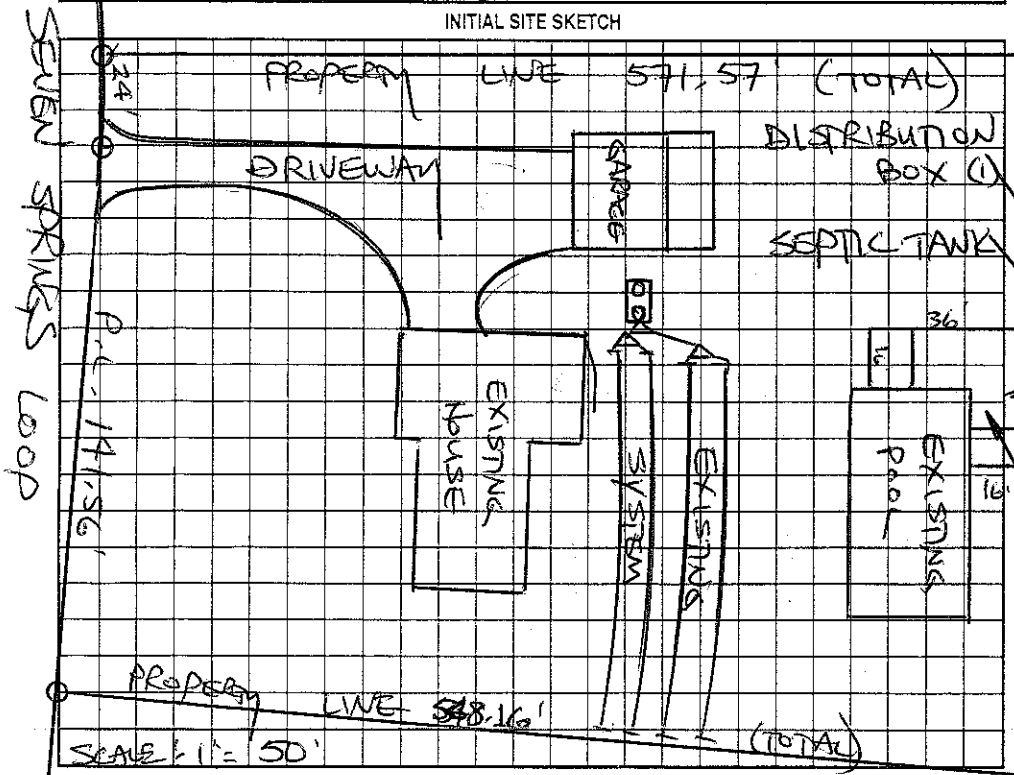
☐ House/Mod. Home No. Bedrooms 0
☐ Mobile Home No. Bathrooms 1
☐ Business No. Employees ____
☐ Other POOL HOUSE

Water Supply: ☐ Individual ☑ Public ☐ Community

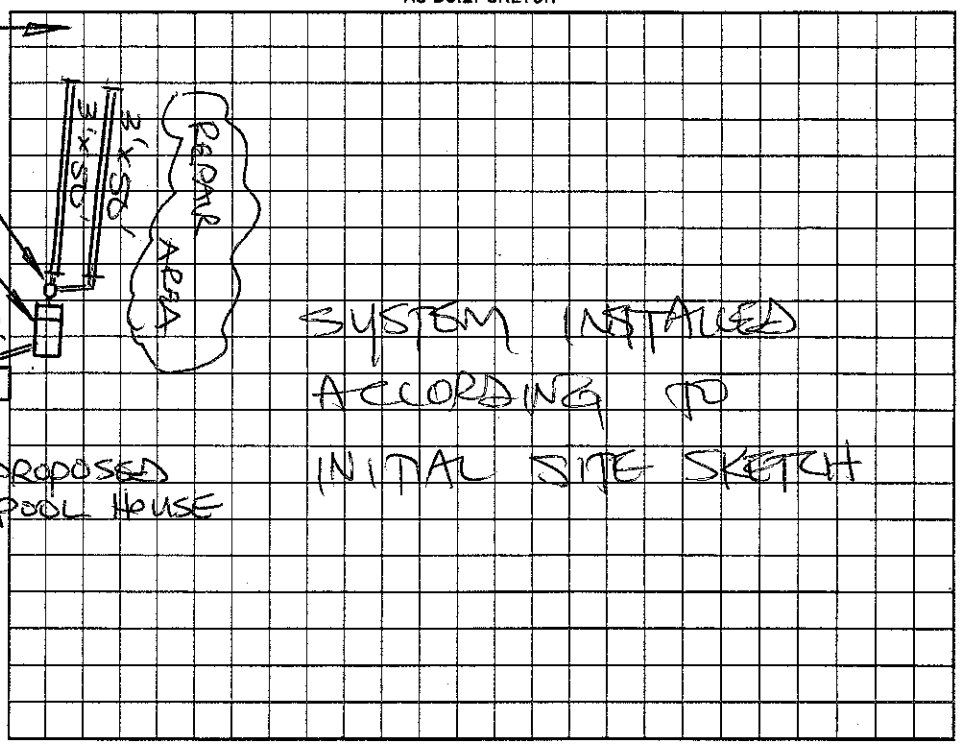
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS FLAGGED ON SITE

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "POLY LOK" FILTER

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: Maudie Mullet date 7-9-04
Improvement Permit by: STEVE HEDRICK date 7-9-04
Authorization to Construct by: STEVE HEDRICK date 7-9-04

Installed by: MULLET BUILDERS
Operation Permit by: STEVE HEDRICK date 7-20-04
Existing System Inspection by: _____ date _____

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