IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 124280 PIN# ~~4766729601~~ 4766729601 DATE 7-6-05

OWNER OR CONTRACTOR Anthony & Tonja Williams PHONE: Business 704-902-4353 Home 704-876-0340

ADDRESS 670 Jane Sowell RD Statesville NC 28625

LOCATION Old Mocksville RD (R) Chesnut (L) Tsprings

SUBDIVISION Tsprings BLOCK / SECTION II LOT 77 LOT AREA .8808 SITE CLASS. 75 DESIGN FLOW 360 L.T.A.R. 13

Septic Tank: 1000 Gallons; STB 1012 Date 6-19-05

Pump Tank: 1000 Gallons; PT 17-1012 Date 10-22-05

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet 1200 Linear Feet 400

No Lines _____ Trench Width 36" Max Trench Bottom Depth 34" Gravel Depth 12"

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

System Description Conv. Pump - Man

Repair System Description ~~25% Pump Reduction~~ 25% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms ___

☐ Business No. Employees ___

☐ Other _____

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

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments:/Conditions:

36" Trench Depth

Yellow Infiltrator filter

septic tank Marker

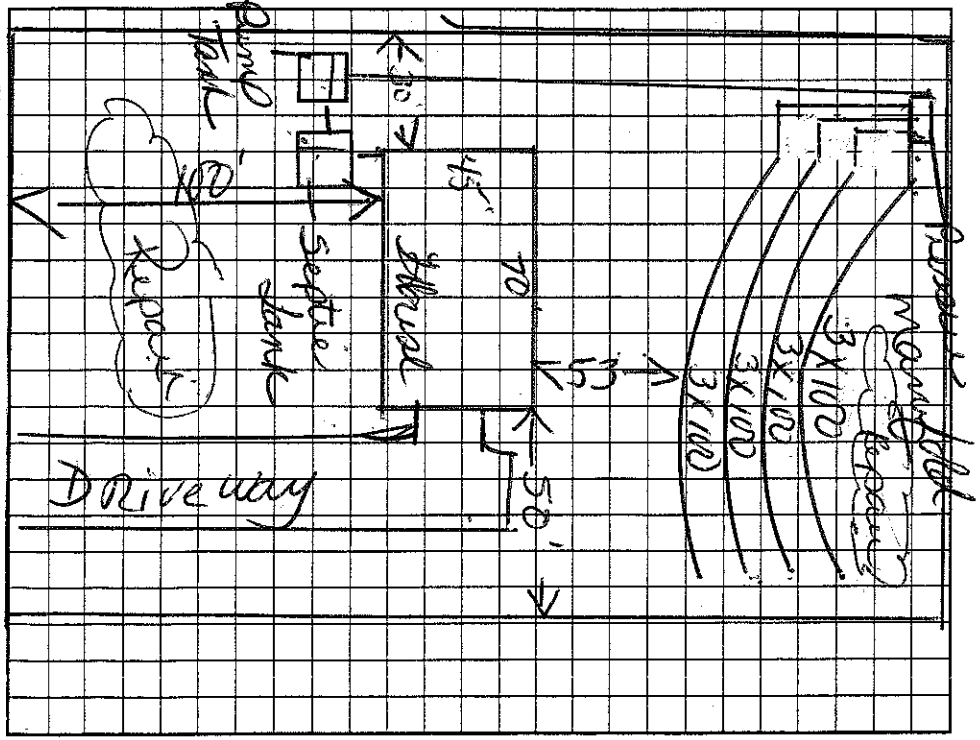
Risers installed as pumped out

1" = 50'

Comments:/Conditions:

25% Reduction for Pressure Repair

INITIAL SITE SKETCH



AS BUILT SKETCH

Gould's Pump
WE0312mtc
LO5 71903

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: Eric B. Wild date 7-7-05

Improvement Permit by: Kelly Cook date 7-6-05

Authorization to Construct by: Kelly Cook date 7-6-05

Installed by: Steve Jordan

Operation Permit by: Kelly Cook date 4-24-06

Existing System Inspection by: _____ date _____

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

4007 Sunset Loop