IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (1) MOORESVILLE 704-664-5281

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

PERMIT# 11916 PIN# 4766-73-0519 DATE 3-10-04

OWNER OR CONTRACTOR JEFFREY TODD ELLIS PHONE: Business 704-902-0119 Home 704-878-6633

ADDRESS 315 SEVEN SPRINGS LOOP STATESVILLE NC 28677

LOCATION OLD MOCKSVILLE ROAD NE, TR CHESTNUT GROVE RD, TR 1ST SEVEN SPRINGS LOOP, 0.2MI ON RIGHT

SUBDIVISION SEVEN SPRINGS BLOCK / SECTION ____ LOT 39 LOT AREA 1.1092 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-22-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ. TO 1200 Linear Feet 300
No Lines FIVE 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

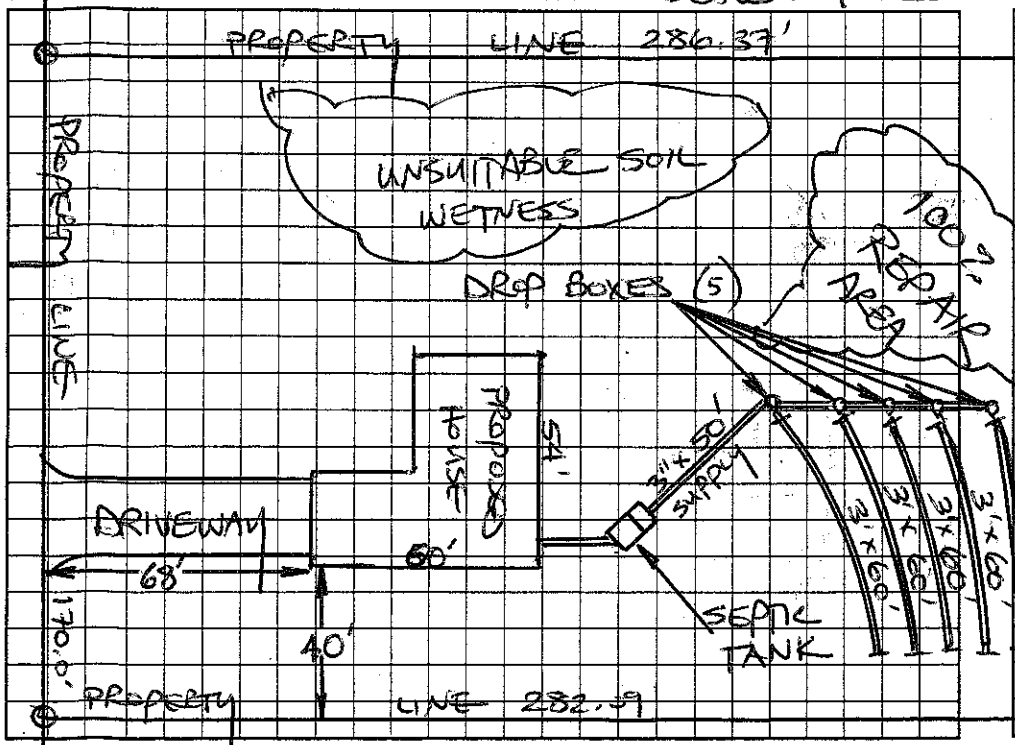
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

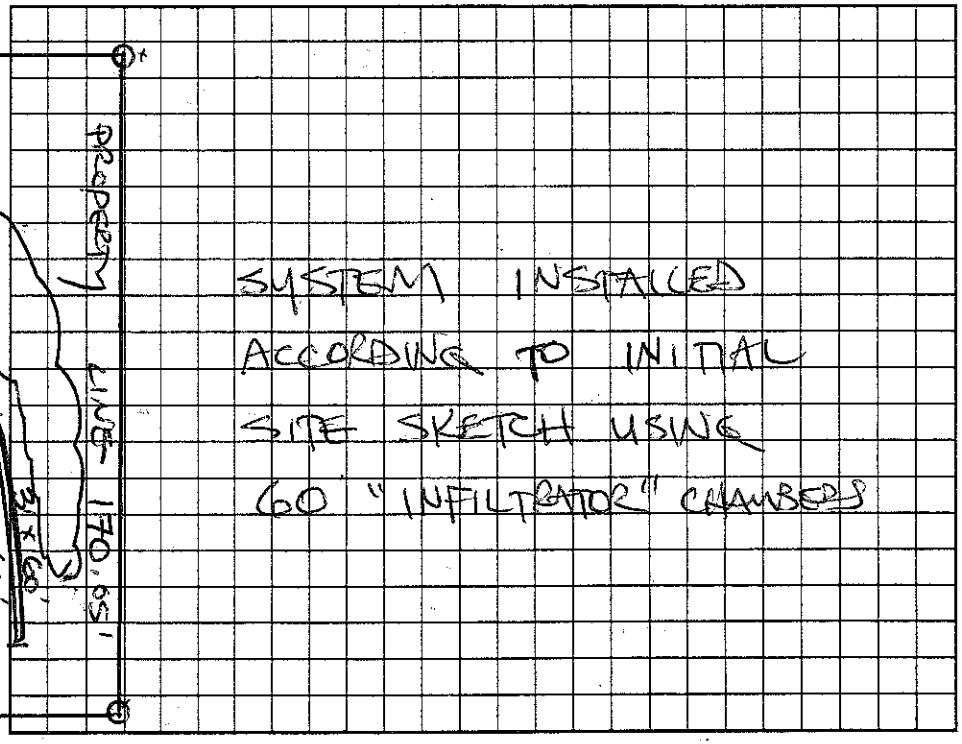
Comments/Conditions: INSTALL 25% REDUCTION SYSTEM

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

INITIAL SITE SKETCH SCALE: 1"=50'



AS BUILT SKETCH



SYSTEM INSTALLED ACCORDING TO INITAL SITE SKETCH USING 60 "INFILTRATOR" CHAMBERS

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 3-10-04 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 3-10-04 Operation Permit by: STEVE HEDRICK date 6-10-04

Authorization to Construct by: STEVE HEDRICK date 3-10-04 Existing System Inspection by: ____ date ____

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