IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 117660 PIN# 4766-73-3417 DATE 1-13-04

OWNER OR CONTRACTOR KENNETH A. WATT PHONE: Business 704-902-4495 Home 704-876-0047

ADDRESS 129 BECKHAM ROAD, STATESVILLE NC 28625

LOCATION OLD MOCKSVILLE ROAD NE, TR CHESTNUT GROVE RD, TR SEVEN SPRINGS LOOP (1ST), ON LEFT BEFORE CURVE

SUBDIVISION SEVEN SPRINGS BLOCK / SECTION I LOT 69 LOT AREA 0.7748 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD PER FT2

Septic Tank: 1000 Gallons; STB 1012 Date 3-7-04
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 FOUR 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, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No

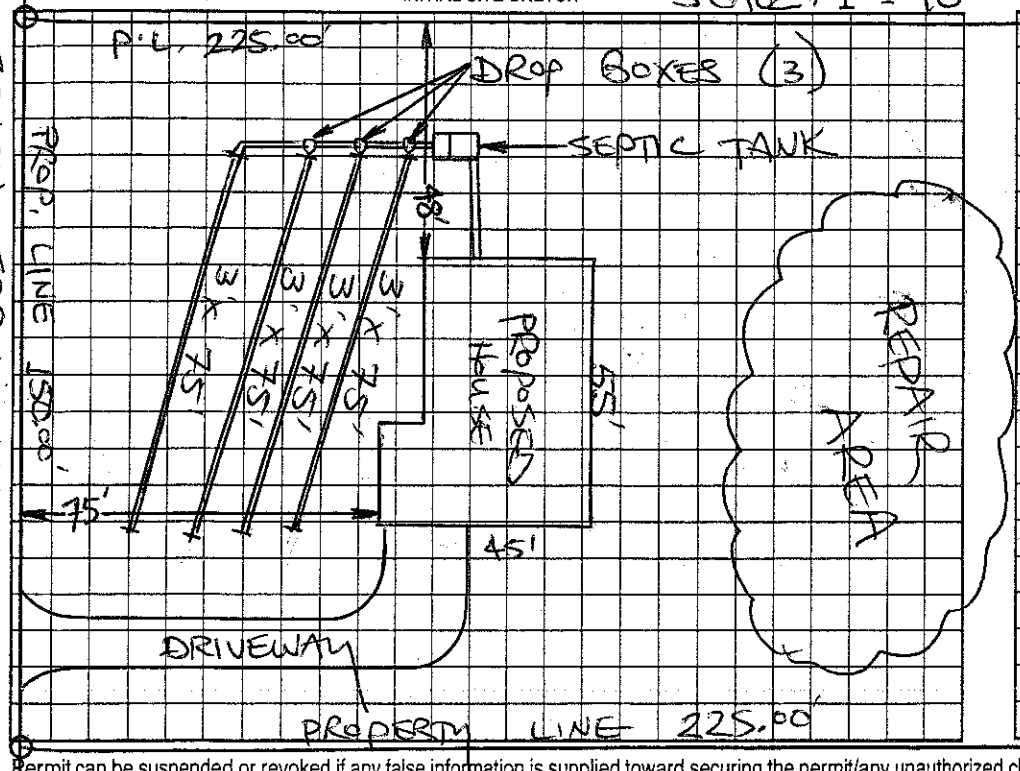
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

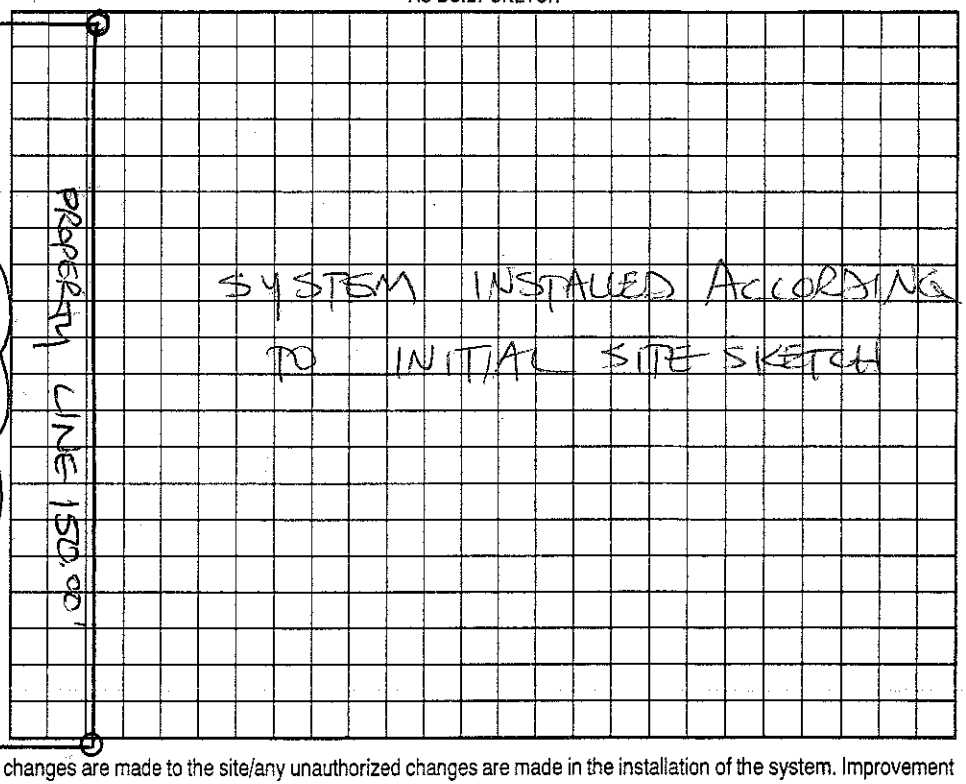
Comments:/Conditions: ① KEEP SYSTEM MINIMUM TEN (10) FEET FROM WATER LINE ② INSTALL 25% REDUCTION SYSTEM IN FOUR LINES ON CONTOUR.

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

INITIAL SITE SKETCH SCALE: 1" = 40'



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 A Watt date 1-13-04 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 1-13-04 Operation Permit by: STEVE HEDRICK date 8-9-04

Authorization to Construct by: STEVE HEDRICK date 1-13-04 Existing System Inspection by: _____ date _____

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