IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 128516 PIN# 4766-75-3286 DATE 6-1-05

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 1ST SEVEN SPRINGS LOOP, 4TH LOT ON LEFT

SUBDIVISION SEVEN SPRINGS BLOCK / SECTION 1 LOT 57 LOT AREA 0.775 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.35 GPD/FT2

Septic Tank: 1000 Gallons; STB NONE Date 3-2-07
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet ER TO 1035 Linear Feet 260
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 PUMP
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____

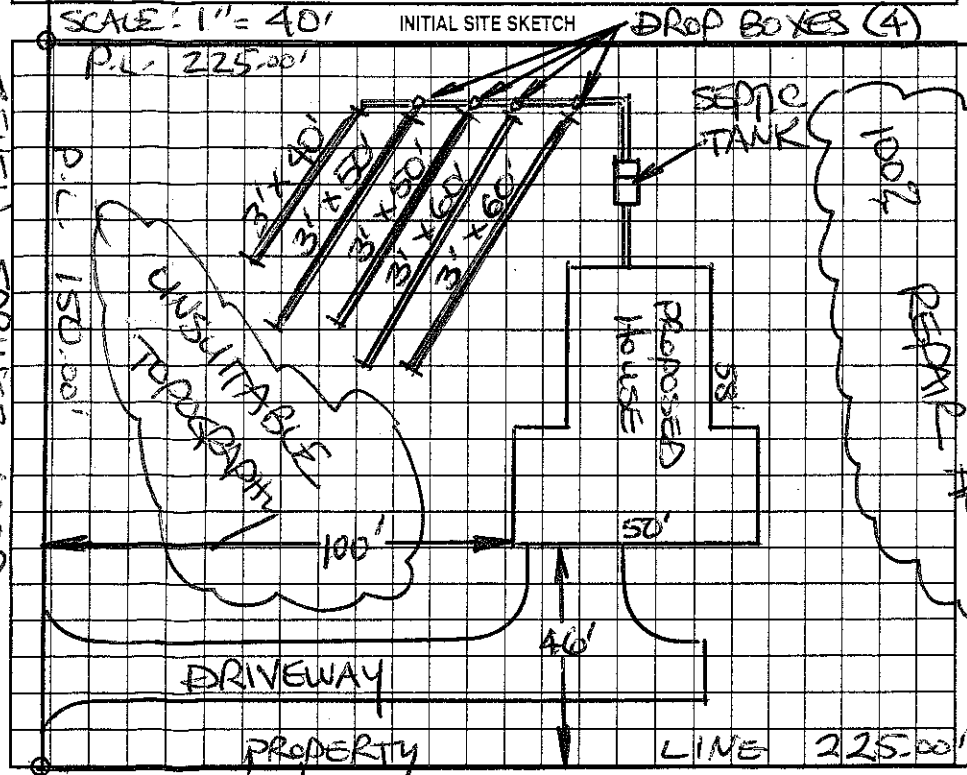
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

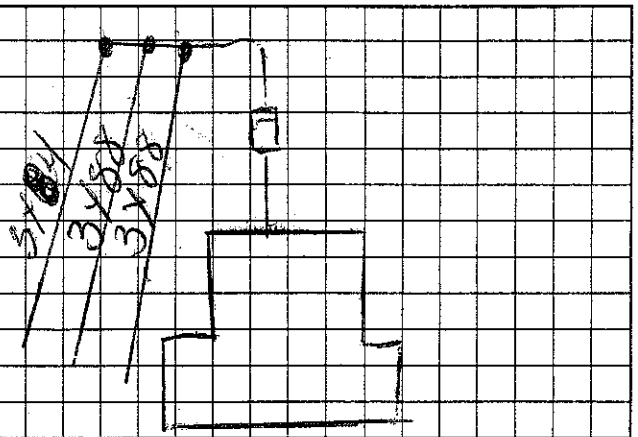
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN

Comments:/Conditions: YELLOW FLAG ON SITE

SCALE: 1" = 40' 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 A Watt date 6-1-05 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HENDRICK date 6-1-05 Operation Permit by: Kelly Cook date 8-21-07

Authorization to Construct by: STEVE HENDRICK date 6-1-05 Existing System Inspection by: ____ date ____

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