IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 88954 PIN# 4766756200 DATE 5/9/00

OWNER OR CONTRACTOR TODD ELLIS PHONE: Business 878-6633 Home

ADDRESS 315 SEVEN SPRINGS LOOP STATESVILLE 28625

LOCATION OLD MOORESVILLE RD. TR CHESTNUT GROVE - TR 2nd TO SPRINGS LOOP - ON RT

SUBDIVISION SEVEN SPRINGS BLOCK / SECTION LOT 97 LOT AREA 2.5 AC SITE CLASS PS DESIGN FLOW 300GPD L.T.A.R. .33 and 1/42

Septic Tank: 1000 Gallons; STB 1012 Date 9-20-00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III IV V VI
System Description: GRAVITY CONVENTIONAL
Repair System Description: GRAVITY CONVENTIONAL
Maintenance Agreement Required: ☐ Yes ☑ No

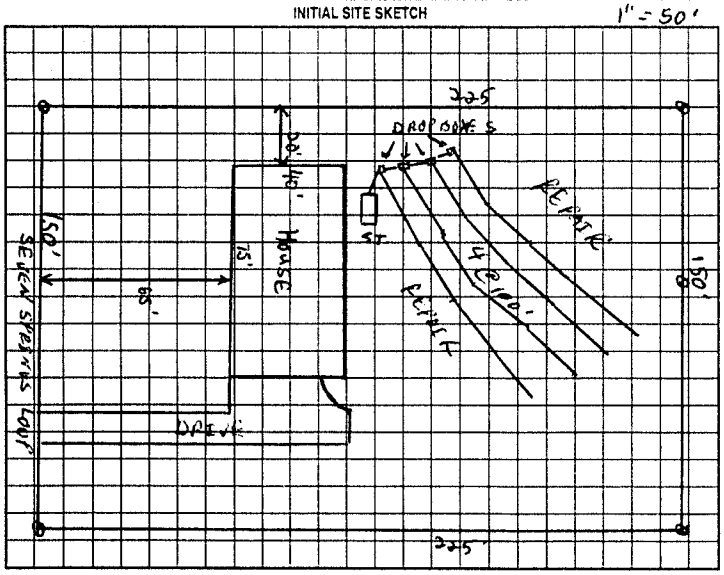
☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

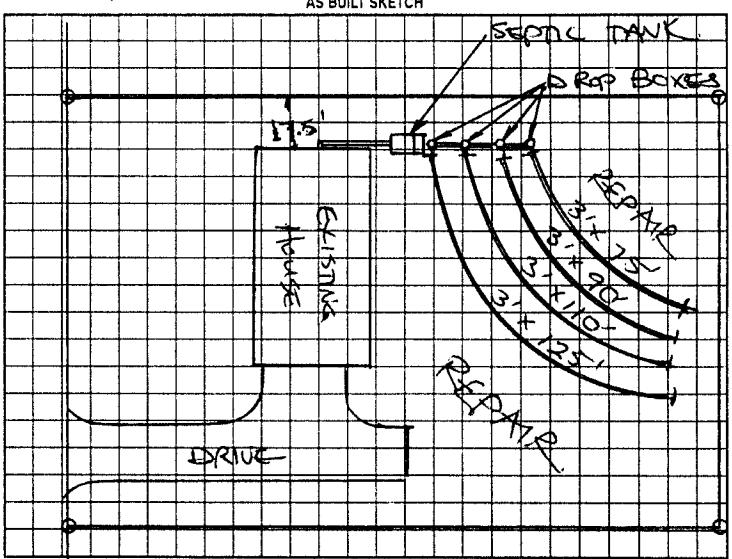
Comments:/Conditions:

Comments:/Conditions: (1) SYSTEM ALTERED AS SHOWN WITH PRIOR HEALTH DEPT. APPROVAL (2) SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK" FILTER

INITIAL SITE SKETCH 1" = 50'



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: date 5/9/00

Improvement Permit by: date 5/9/00

Authorization to Construct by: date 5/9/00

Installed by: DAVID YOUNTS

Operation Permit by: STEVE HEARICK date 11-16-00

Existing System Inspection by: date

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