IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101221 PIN# 4766-75-6617 DATE 7-13-01

OWNER OR CONTRACTOR LINDA TRAN PHONE: Business _____ Home 704-871-1877

ADDRESS 106 7 SPRINGS LOOP, STATESVILLE, NC 28625

LOCATION 646, ① RIVER HILL, ② CHESTNUT GROVE, ③ 7 SPRINGS LOOP, 1st on RIGHT

SUBDIVISION 7 SPRINGS BLOCK / SECTION _____ LOT 100 LOT AREA 1.19 AC SITE CLASS PS DESIGN FLOW 120 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 1-21-2001 ☒ New System ☐ Repair System Type: I (II) III IV V VI

Pump Tank: _____ Gallons: PT _____ Date _____ System Description: CONV GRAV

Pump Make: _____ Model _____ Serial No _____ Repair System Description: GRA-I/pump 25%/pod

Nitrification Field: No Fields 1 Square Feet 400 Linear Feet 130 Maintenance Agreement Required: ☐ Yes ☐ No

No Lines 2 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12

☒ House/Mod. Home No. Bedrooms 1

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees _____

☒ Other GARAGE/APT

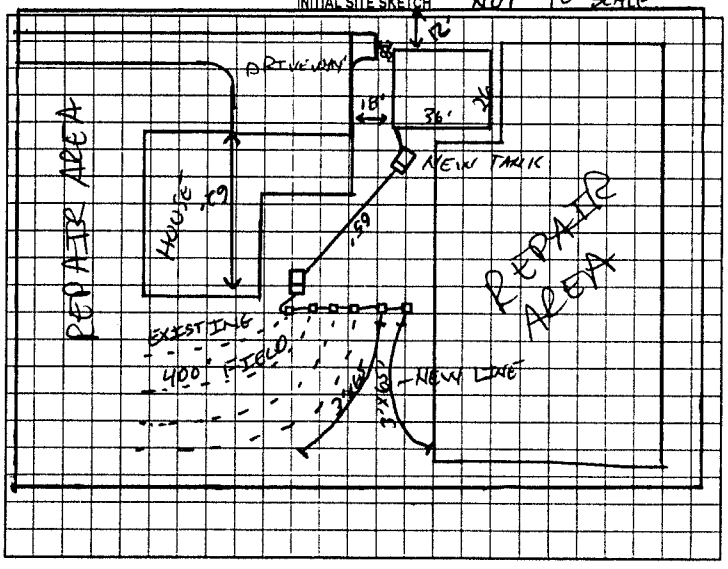
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: ① BACKFILL GARAGE AREA & SURROUNDING AREA TO MAINTAIN FALL FROM 1ST NEW TANK TO 2nd EXISTING TANK. ② TIE INTO CAST DROP BOX ③ INSTALL LINES ON CONTOUR & MAINTAIN SETBACKS.

Comments/Conditions: ① POLYLOK FILTER & RISERS INSTALLED AS SHOWN

INITIAL SITE SKETCH NOT TO SCALE



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 7-13-01 Installed by: DAVID YOUNTZ

Improvement Permit by: _____ date 7-13-01 Operation Permit by: _____ date 9-5-01

Authorization to Construct by: _____ date 7-13-01 Existing System Inspection by: _____ date _____

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