IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125663 PIN# 4767-66-4363 DATE 1-4-05

OWNER OR CONTRACTOR ALLEN E. LEWIS PHONE: Business 704-878-2305 Home 704-871-7896

ADDRESS 118 NEW HOPE ROAD STATESVILLE, NC 28625

LOCATION OLD MOCKSVILLE ROAD, TL CHURCHES LAKE ROAD, TR STONE CREEK DR, TL MILL BRANCH 2ND on (R)

SUBDIVISION STONE CREEK BLOCK / SECTION ____ LOT 20 LOT AREA 1.076 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 10-5-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

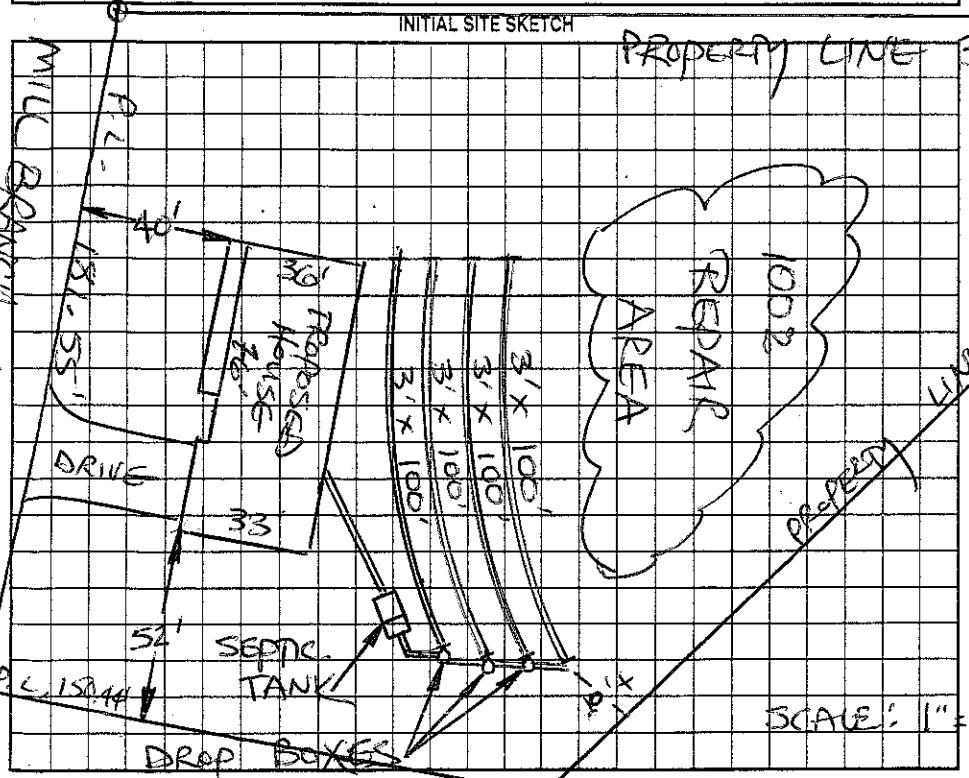
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

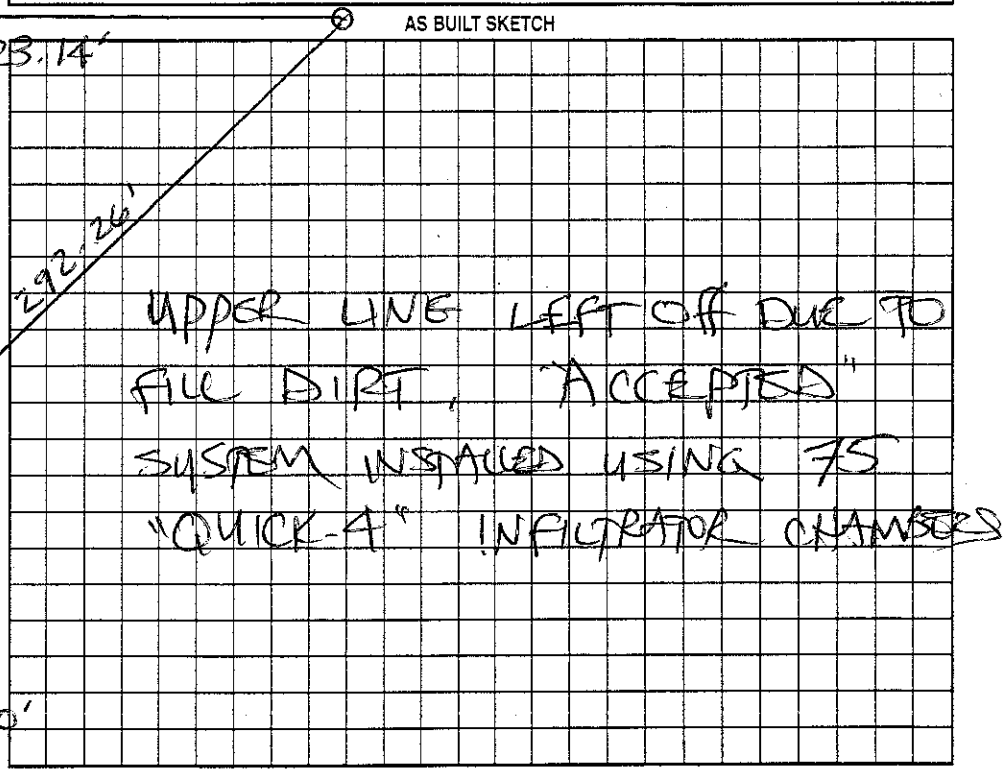
Comments:/Conditions: INSTALL LINES ON CONTOUR AS FLAGGED, KEEP SYSTEM MINIMUM 10' FROM PROPERTY LINES

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

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: Allen Lewis date 1-4-05 Installed by: DAVID YOUNTS

Improvement Permit by: STEVE HEDRICK date 1-4-05 Operation Permit by: STEVE HEDRICK date 6-6-05

Authorization to Construct by: STEVE HEDRICK date 1-4-05 Existing System Inspection by: ____ date ____

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