# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14824820 PIN# 4773526135 DATE 2/11/08

OWNER OR APPLICANT Doug Henshaw PHONE: Business _____ Home 704-871-8087

ADDRESS 125 Randall Ln Statesville, NC 28625

LOCATION 1662 Triplett Rd. / Hwy 70 E, TR Triplett Rd., 1st property on lt

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 6.77 acres SITE CLASS. P.S. DESIGN FLOW 240 gpd/4 T.A.R. 0.3

Septic Tank: 1000 Gallons: STB 1007 Date 2-13-08

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 800' Linear Feet 200'

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A ☑ Gravity ☐ Pressure

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

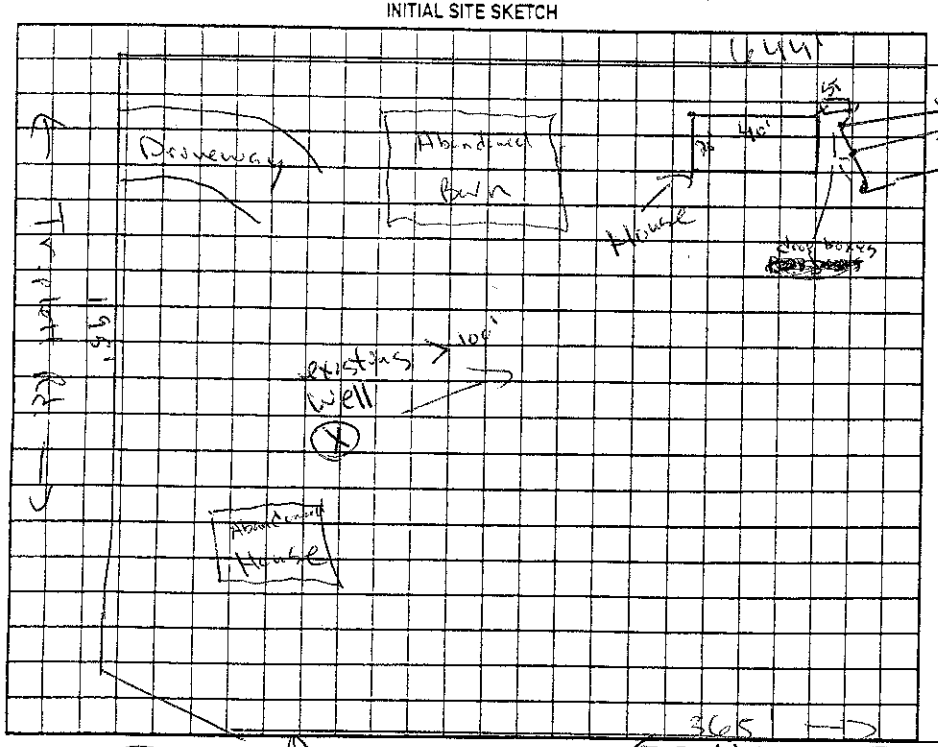
Water Supply: ☐ Individual ☑ Public ☐ Community

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

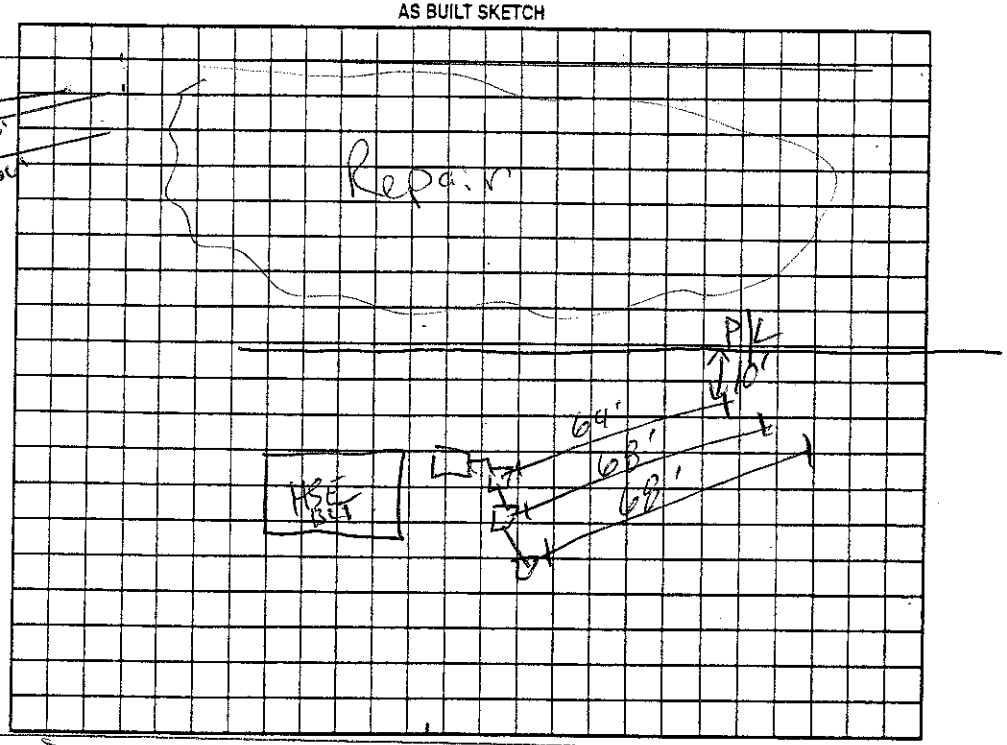
Comments:/Conditions:
- Install on Contour
- may use end cap distribution if infiltrators use
- maintain setbacks
- layout as Flagged

Comments:/Conditions: BOLCO Filter + MANIFOLD LINE 1 64'
Line 3 had 1/8" fall per foot LINE 2 68'
LINE 3 68'

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: _____ date 2/11/08 Installed by: Weldon's Grading

Improvement Permit by: _____ date 2/11/08 Operation Permit by: _____ date 4-9-08

Authorization to Construct by: _____ date 2/11/08 Existing System Inspection by: _____ date _____

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