IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 217818

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

PIN # 4774-21-8810.000

APPLICANT: Alvin Pettit APPLICANT ADDRESS: 194 Primrose Ln. Statesville NC 28625

SITE ADDRESS: 194 Primrose Ln. Statesville NC 28625 PHONE: 704-876-3534 ALT. PHONE: 704-902-0799

SITE DIRECTIONS: Hwy 64, Tr New Salem, Tr Primrose, Stay Left @ Fork, Site @ End.

SUBDIVISION: — SECTION: — LOT # — LOT AREA: 11 Acre DESIGN FLOW: 480 GPD L.T.A.R.: .3 I / .25 R

Septic Tank Existing (gal) STB Date
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 2 @ 50' Linear Ft: 100'
Trench Width 36" Max. Trench Bottom Depth 24"-36" Gravel Depth N/A

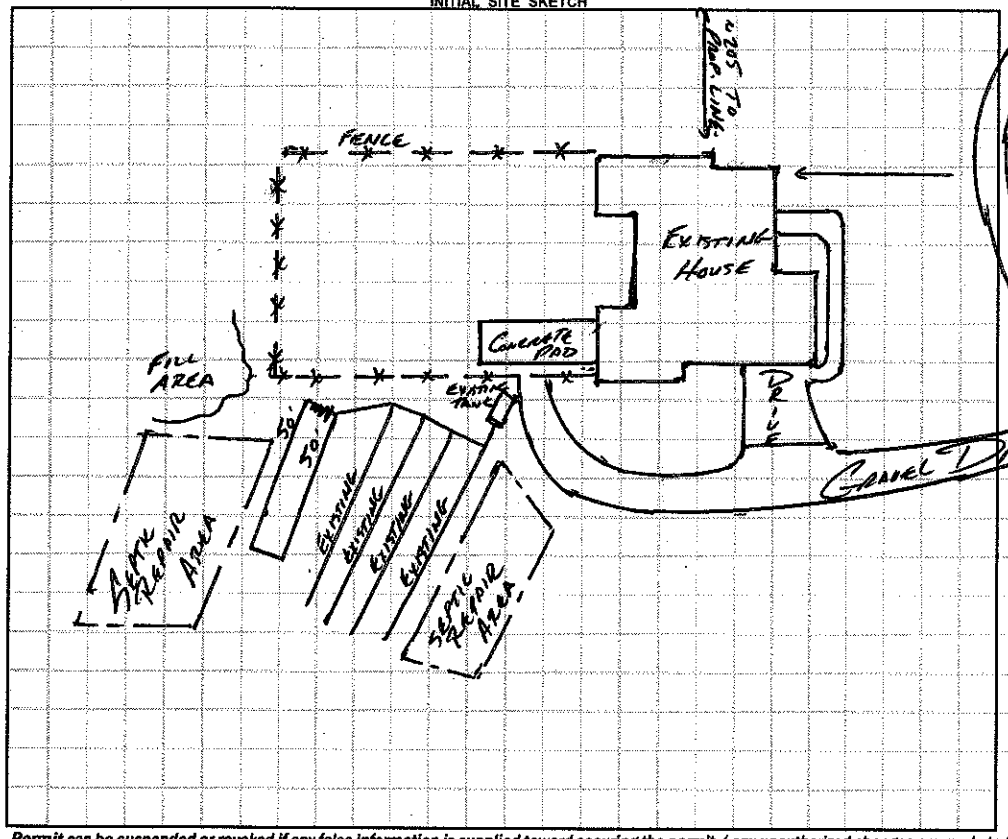
☐ New System ☐ Repair ☒ Expansion System Type: I II III IV V VI
System Description: 25% Reduction - Gravity
Repair System Description: LP-PDBPS
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4
☐ Business No. Persons 8
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

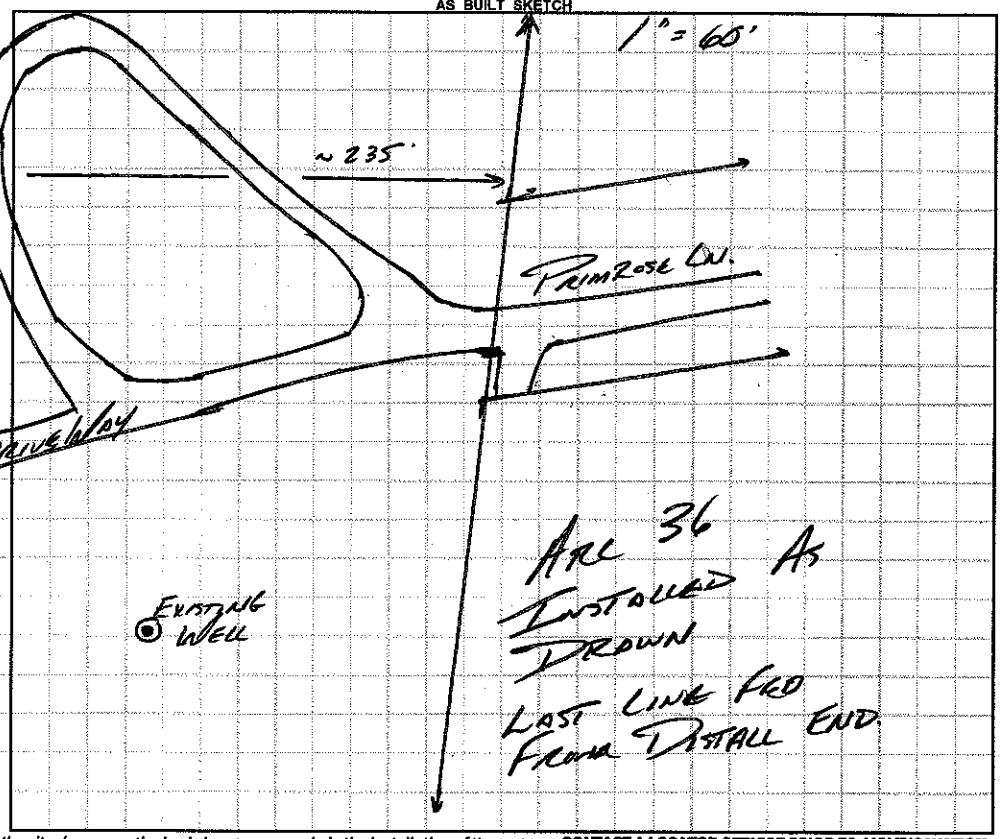
Water Supply
☒ Private Existing
☐ Public
☐ Community

Comments / Conditions: Serial Distribute From Existing System To 2 New 50' Lines. Follow All NC Septic Rules.

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 6/8/16 Installed by: Kevin Bowles

IMPROVEMENT PERMIT by: Date: 6/7/16 OPERATION PERMIT by: Date: 6/16/16

AUTHORIZATION TO CONSTRUCT by: Date: 6/7/16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK