This permit replaces the one dated 5-26-04

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 20807 PIN# 4774647398 DATE 10-9-07

OWNER OR APPLICANT Standard Building Company PHONE: Business _____ Home 704-902-4618

ADDRESS 161 Barringer Drive Statesville NC 28677

LOCATION 64E (R) Barringer Oak Rd (L) Mills Garden Rd 1.5 miles on Right

SUBDIVISION Mills Garden Farms BLOCK / SECTION _____ LOT 4 LOT AREA .84 SITE CLASS B DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons: STB 1015 Date 10/4/07

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet 1440 Linear Feet 360

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

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

System Description: 25% Conv.

Repair System Description: 50% Low Prof

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Persons ___ No. Employees ___

Water Supply: ☐ Individual ☑ Public ☐ Community

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

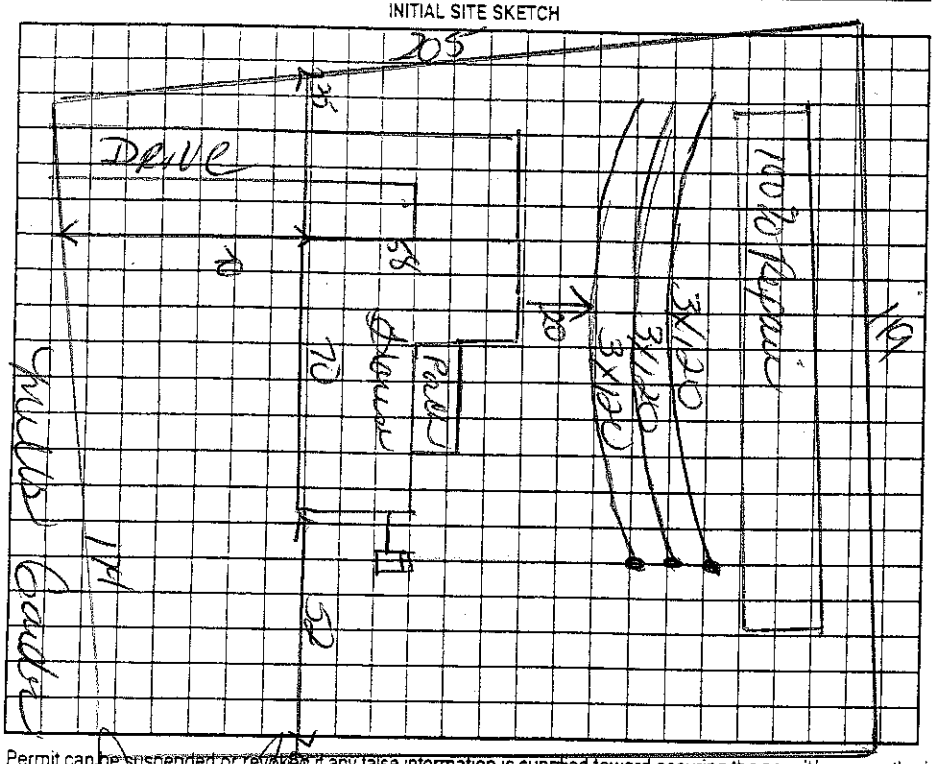
Comments:/Conditions:

Yellow flag

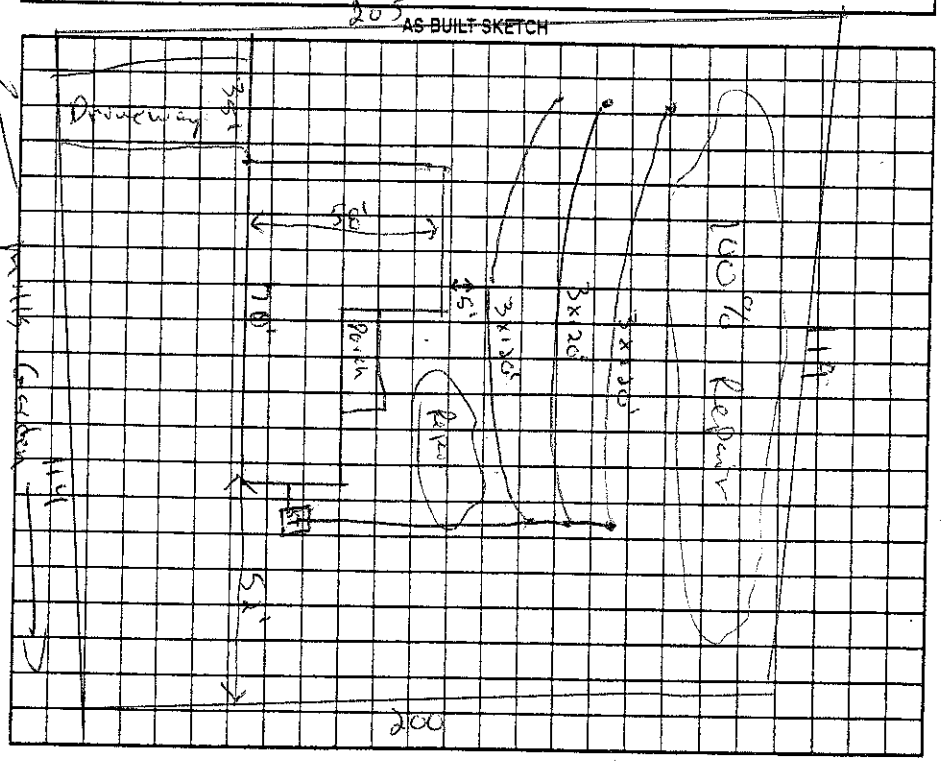
Comments:/Conditions:

Install on Contour
Maintain all setbacks

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 10/10/07 Installed by: _____

Improvement Permit by: Kenny Cook date 10-9-07 Operation Permit by: [illegible] date 2/12/08

Authorization to Construct by: Kenny Cook date 10-9-07 Existing System Inspection by: _____ date _____

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