IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (1) MOORESVILLE 704-664-5281

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

PERMIT# 114572 PIN# 4774-76-3147 66-8307 DATE 12-3-03

OWNER OR CONTRACTOR DAVID HENDRY PHONE: Business _____ Home 704-838-1855

ADDRESS 187 SKYLAND DRIVE STATESVILLE NC 28625

LOCATION US 64 EAST, TR BARRY OAK RD, TR MILLS GARDEN RD @ 1.1 MILES ON LEFT, 228' BACK

SUBDIVISION _____ BLOCK / SECTION _____ LOT AREA 5.00 ACRES SITE CLASS: PS DESIGN FLOW 480 L.T.A.R. 0.20 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 2-4-04

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ. TO 2400 Linear Feet 600

No Lines SIX Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION, GRAVITY

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees _____

☐ Other _____

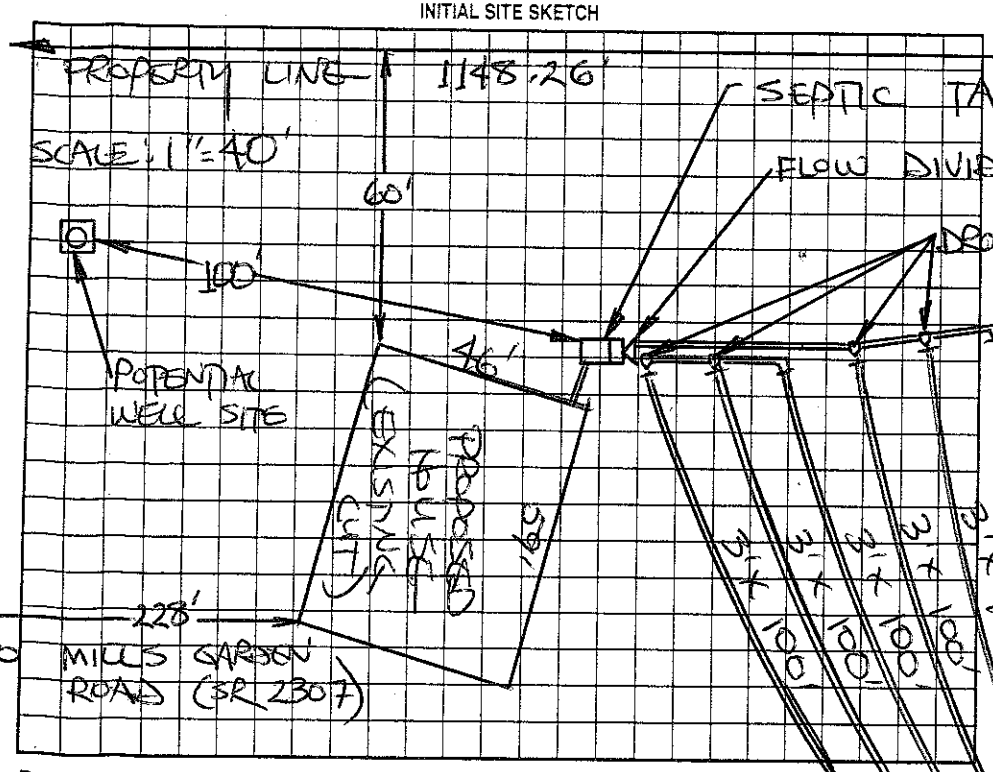
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

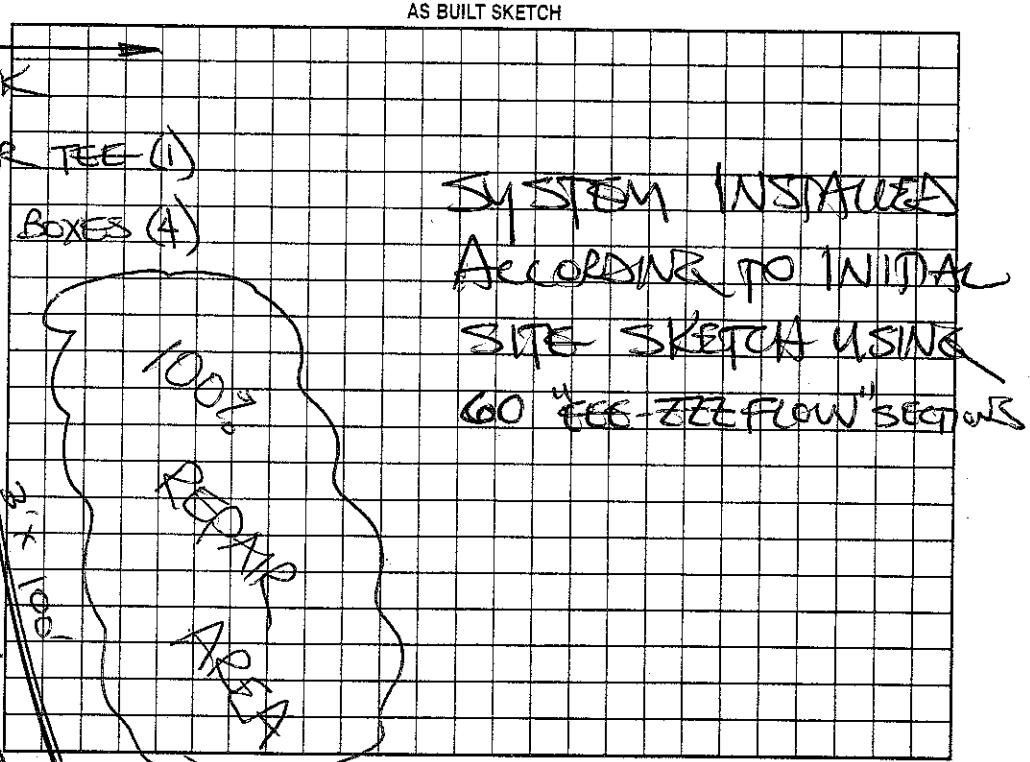
Comments:/Conditions: (1) INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN (2) REMOVE EXISTING FIELD TERRACE

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING A "ZABEL" 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: Amy Hendry date 12-5-03

Improvement Permit by: STEVE HEDRICK date 12-3-03

Authorization to Construct by: STEVE HEDRICK date 12-3-03

Installed by: BRENT GAUNTER

Operation Permit by: STEVE HEDRICK date 4-21-04

Existing System Inspection by: _____ date _____

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