IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4775-37-7609 DATE 9-26-2007

OWNER OR APPLICANT DONNA M. CAMPBELL PHONE: Business 704-878-5302 Home 704-871-0209

ADDRESS 143 NOTTINGHAM CIRCLE STATESVILLE NC 28625

LOCATION US 64 EAST, TL SAIN ROAD, TR FOX CREEK S/D, TL NOTTINGHAM CIRCLE, HOUSE ON LEFT AT #143

SUBDIVISION FOX CREEK BLOCK / SECTION ____ LOT 17 LOT AREA 1.28 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons: STB ____ Date ____

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 2 Square Feet EX. Linear Feet EX

No Lines EX. Trench Width EX Max Trench Bottom Depth EX Gravel Depth EX

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

System Description: CONVENTIONAL, GRAVITY

Repair System Description: ____

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other ____

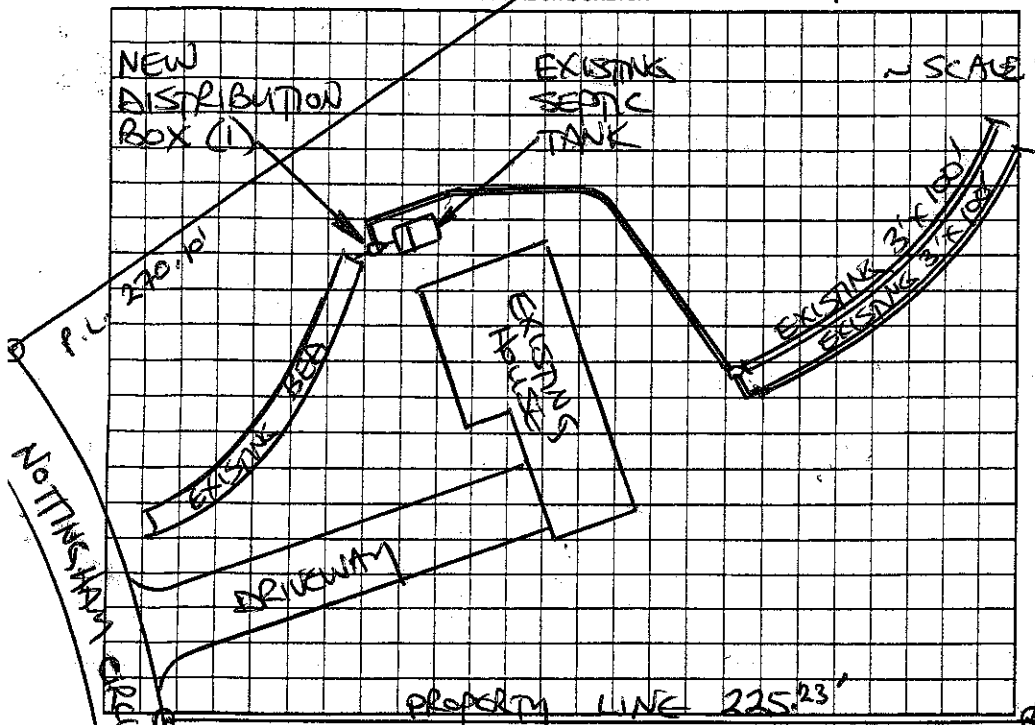
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

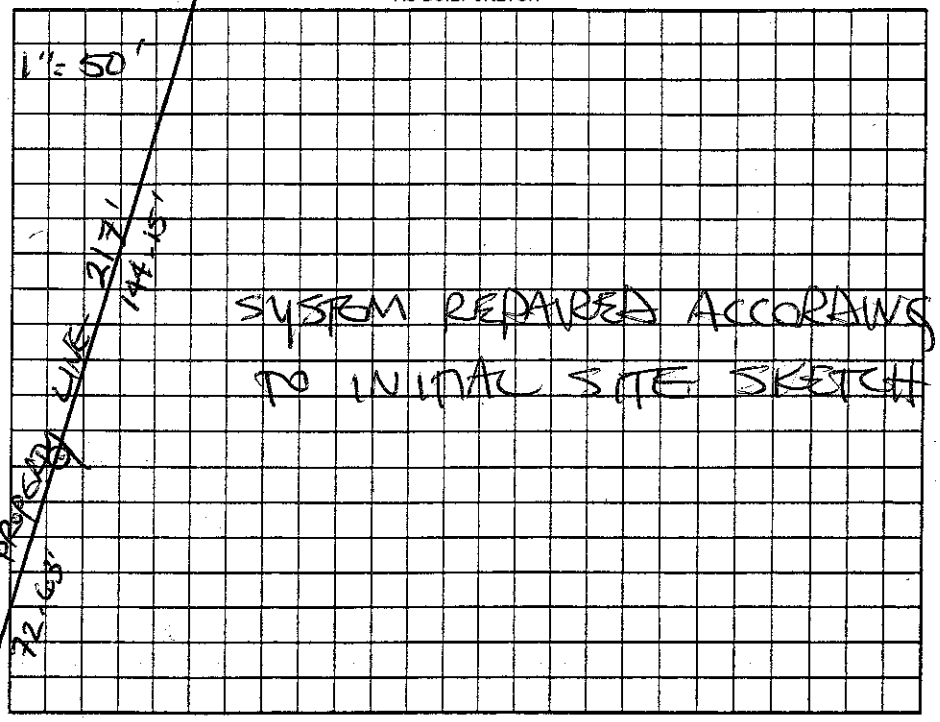
Comments:/Conditions: ① REPLACE EXISTING "BUCK RUN" VALVE WITH NEW DISTRIBUTION BOX FEEDING FIELD IN FRONT YARD FIRST ② REPLACE SANITARY TEE WITH NEW EFFLUENT FILTER & INSURE ALL SUPPLY LINES ARE CLEAR.

Comments:/Conditions:

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: Donna M. Campbell date 9-26-07 Installed by: JAREA LENTZ

Improvement Permit by: STEVE HENDRICK date 9-26-07 Operation Permit by: STEVE HENDRICK date 10-30-07

Authorization to Construct by: STEVE HENDRICK date 9-26-07 Existing System Inspection by: ____ date ____

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