IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 180809

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

PIN # 4775-645-201.132

APPLICANT: JENNIFER HURT APPLICANT ADDRESS: 130 OAK FOREST DRIVE, STATESVILLE

SITE ADDRESS: 132 OAK FOREST DR. STATESVILLE PHONE: 704-873-4916 ALT. PHONE:

SITE DIRECTIONS: HWY 64 E (R) ONTO BARRY OAK (L) OAK FOREST DR, PROPERTY IS 1ST ON (R)

SUBDIVISION: SECTION: LOT # LOT AREA: DESIGN FLOW: 240 GPD L.T.A.R.: 0.3 GPD/FT²

Septic Tank 1000 (gal) STB 1012-1060 Date 11-15-12
Pump Tank (gal) PT Date
Pump Make Model Serial #
Nitrification Fields 1 # Lines 2 Linear Ft: 200
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

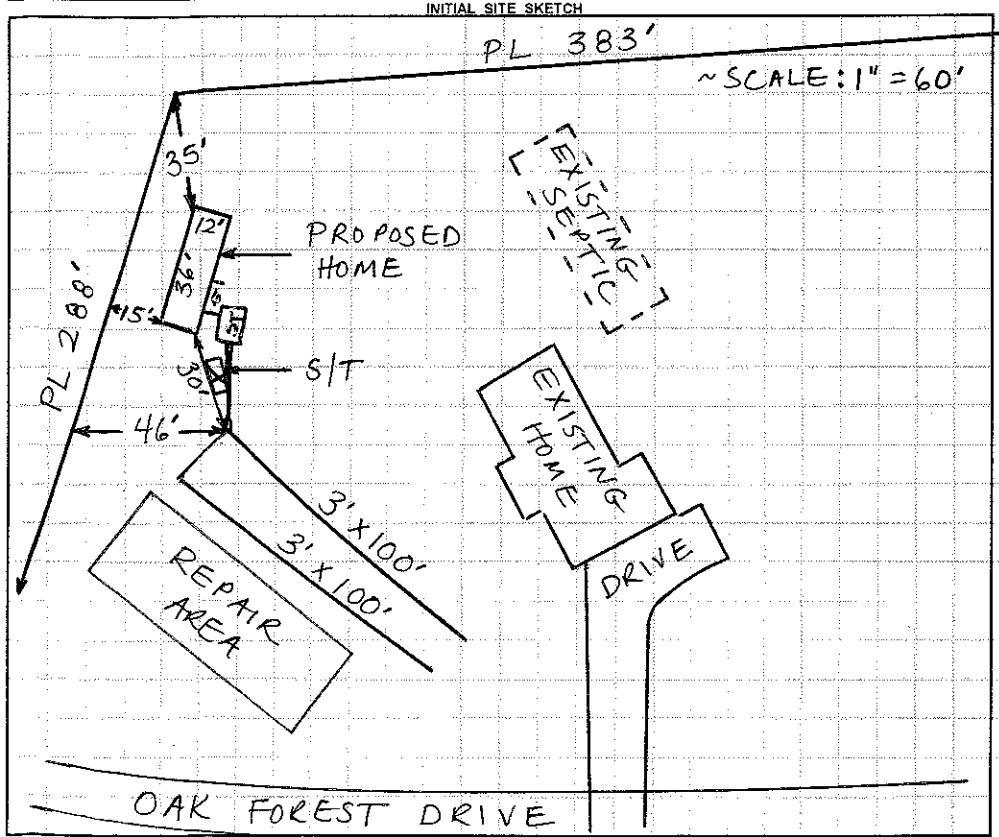
☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 25% REDUCTION GRAVITY
Repair System Description: 25% REDUCTION GRAVITY
Maintenance Agreement Required: ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 1
☐ Business No. Persons
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN USING SERIAL DISTRIBUTION

INITIAL SITE SKETCH



AS BUILT SKETCH

- Red poly lok filters installed
- 2" PVC tank marker installed
- Installed as drawn

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: Bill Hurt Date: 9-30-13 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Kimberley Mecimore, REHS Date: 9/27/13 OPERATION PERMIT by: Justin Henderson Date: 10-15-13

AUTHORIZATION TO CONSTRUCT by: Kimberley Mecimore, REHS Date: 9/27/13 Existing System Inspected by: Date:

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