IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 87773 PIN# 4766959764 DATE 2-14-00

OWNER OR CONTRACTOR Stikeleather + Associates PHONE: Business 876 6847 Home

ADDRESS PO Box 6286 Statesville, N.C.

LOCATION 64E Tb Riverhill Tb Chestnut Grove TR Eastgate 10th lot Rt.

SUBDIVISION Eastgate BLOCK / SECTION LOT 28 LOT AREA 22437 SITE CLASS AS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 825 Date 1-27-00

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I (II) III IV V VI

System Description: Conv. Gravity

Repair System Description: Pump To 2570 Rstu.

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

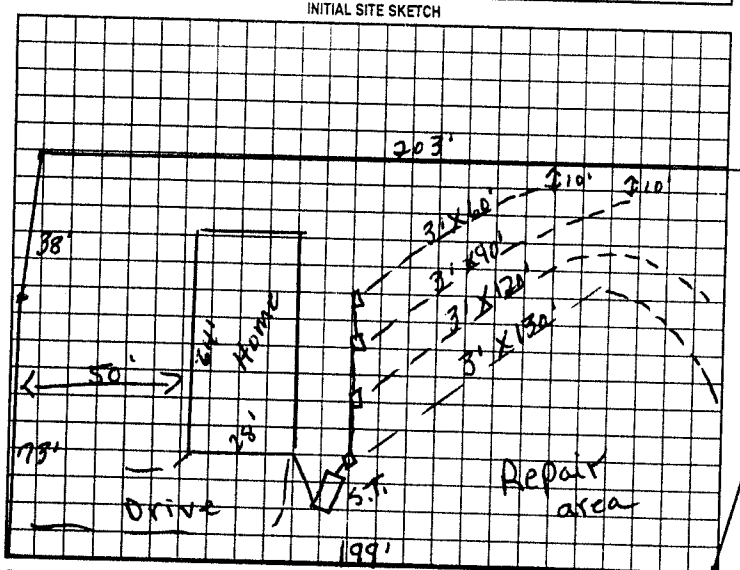
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

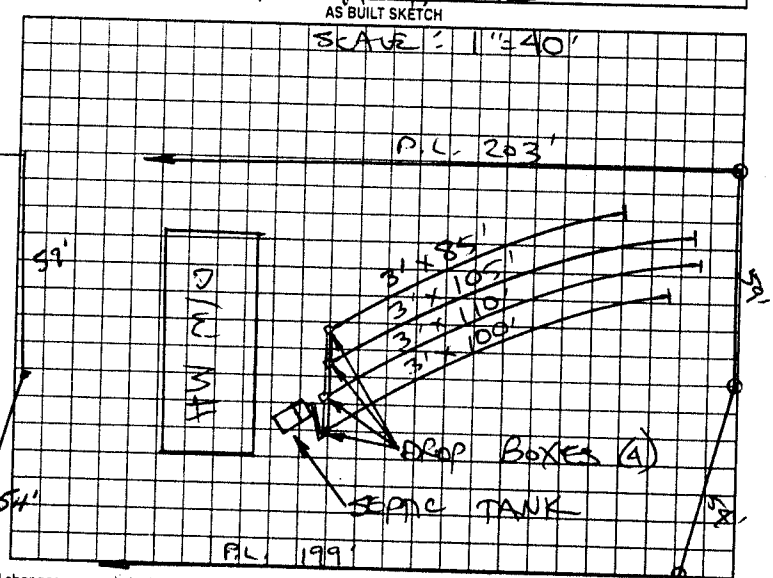
Comments:/Conditions:

Comments:/Conditions: ① SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK FILTER ② SYSTEM ALTERED AS SHOWN BELOW WITH PRIOR HEALTH DEPT. APPROVAL

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: Ben Stikeleather date 2-16-00 Installed by: C & W GRADING

Improvement Permit by: P.C. Moore date 2-14-00 Operation Permit by: STEVE HENDRICK date 3-14-00

Authorization to Construct by: P.C. Moore date 2-14-00 Existing System Inspection by: date

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