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# 4776-15-2299 DATE 2-17-04

OWNER OR CONTRACTOR MICHAEL J. TUCKER PHONE: Business 704-450-0515 Home % 704-876-6648 ROGER THOMAS

ADDRESS 228 BAYMOUNT DRIVE, STATESVILLE NC 28625-9547

LOCATION US 64 EAST, TL RIVER HILL ROAD, TR 2ND INDEPENDENCE LOOP, 2ND HOME ON LEFT

SUBDIVISION RIVER HILL Hgts BLOCK / SECTION ____ LOT 26 LOT AREA LIMITED SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. EXISTING 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines THREE Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: CONVENTIONAL, GRAVITY

Repair System Description: CONVENTIONAL, GRAVITY

Maintenance ~~Agreement Required~~: ☐ Yes ☑ No

Gravel Depth 18"

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

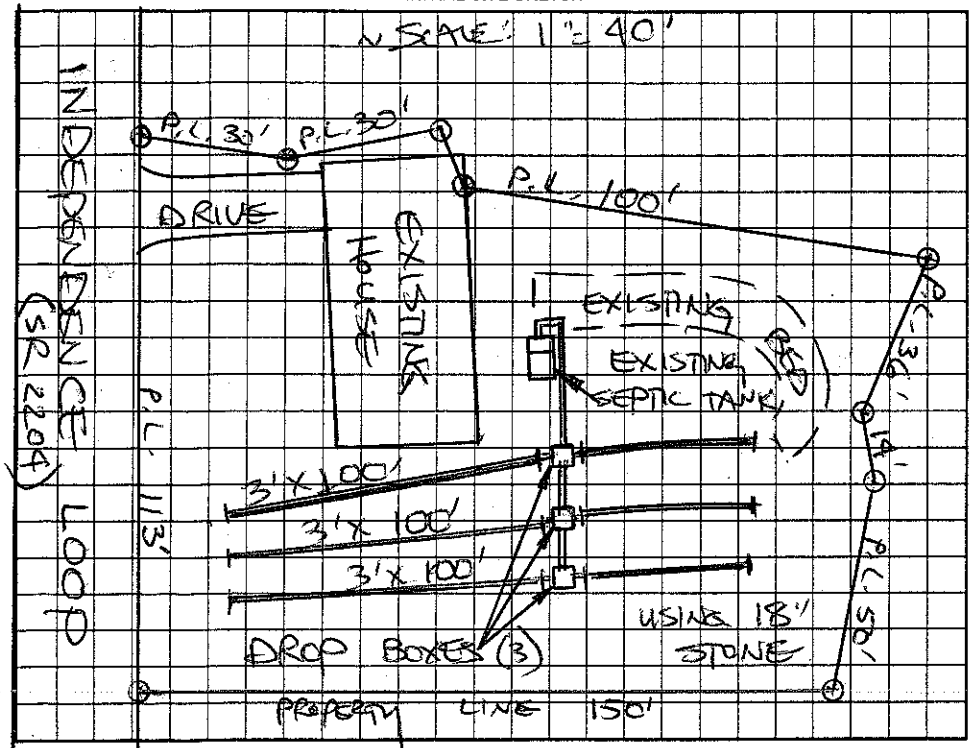
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: ① ABANDON EXISTING BED SYSTEM ② INSTALL NEW LINES AS FLAGGED ON CONTOUR USING 18" STONE ③ REPAIR WATER LINE LEAK ④ IMPROVE SURFACE DRAINAGE DITCH AT ROAD

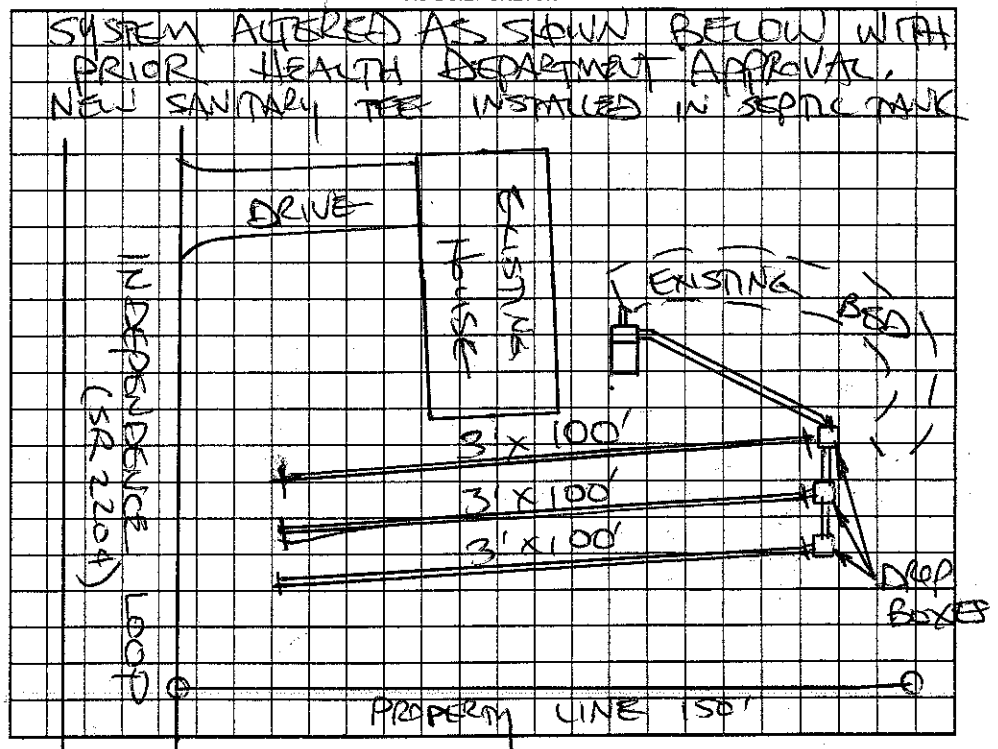
Comments:/Conditions: ⑤ THIS PERMIT SERVES AS "NOTICE OF VIOLATION"; SYSTEM TO BE REPAIRED BY 3-20-04

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM ALTERED AS SHOWN BELOW WITH PRIOR HEALTH DEPARTMENT APPROVAL. NEW SANITARY TEE INSTALLED IN SEPTIC TANK



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: Roger Thomas date 2/18/04 Installed by: WES LYTTON

Improvement Permit by: STEVE HEDRICK date 2-17-04 Operation Permit by: STEVE HEDRICK date 3-25-04

Authorization to Construct by: STEVE HEDRICK date 2-17-04 Existing System Inspection by: ____ date ____

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