IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 213046

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

PIN # 4776525829

APPLICANT: Reid White APPLICANT ADDRESS: 198 McAllister Rd Statesville NC

SITE ADDRESS: 198 McAllister Rd Statesville NC PHONE: 704-871-9717 ALT. PHONE: 704-682-9800

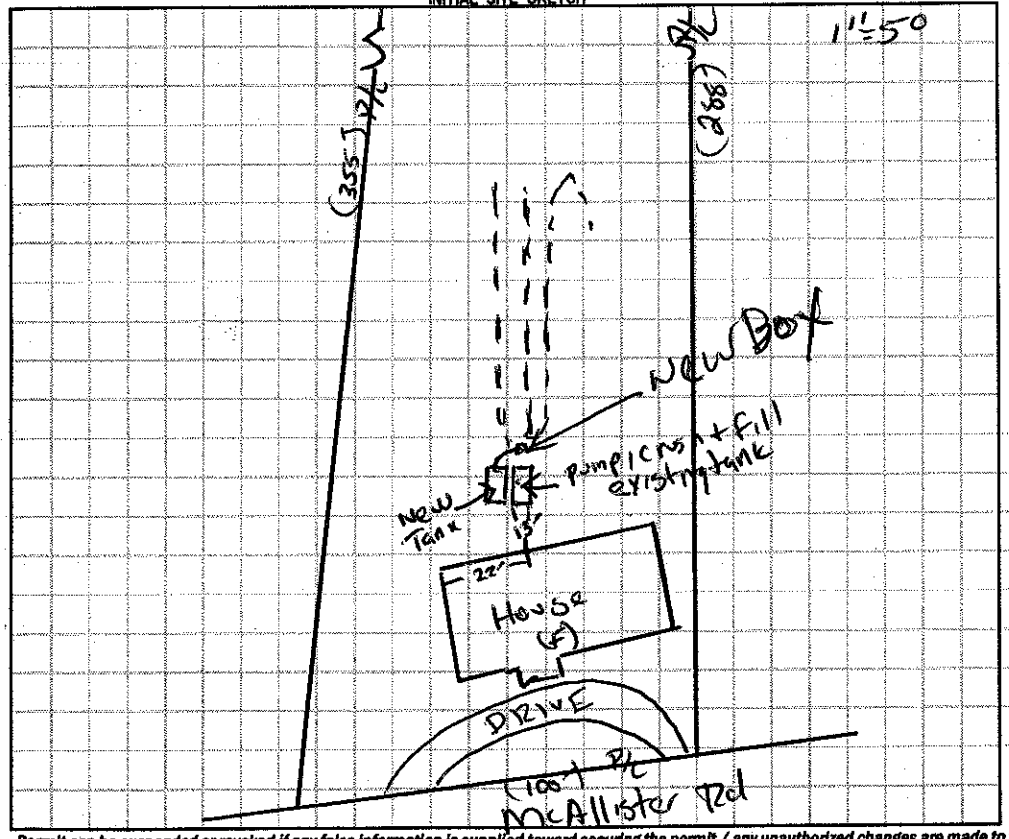
SITE DIRECTIONS: 64E T/L Swann Rd T/L McAllister house on right

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 0.62ac DESIGN FLOW: Ex L.T.A.R.: Ex

Septic Tank	1000 (gal)	STB		Date	5-19-15	☐ New System	☒ Repair	☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms	Ex	Water Supply
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:	Tank			☐ Business	No. Persons	Ex	☐ Private
Pump Make	N/A	Model	Polytank	Serial #	PL-6R	Repair System Description:				☐ Other	No. Employees		☒ Public
# Nitrification Fields	Ex	# Lines	Ex	Linear Ft:	Ex	Maintenance Agreement Required:	☐ YES	☑ NO		☐ Slab	☒ Crawl Space		☐ Community
Trench Width	Ex	Max. Trench Bottom Depth	Ex	Gravel Depth	Ex		☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Pump, crush & fill existing tank.
Maintain 5' of any building foundation
Use risers if needed

INITIAL SITE SKETCH



AS BUILT SKETCH

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: Reid White Date: 9-3-15

IMPROVEMENT PERMIT by: Date: 08/26/15

AUTHORIZATION TO CONSTRUCT by: Date: 08/26/15

Installed by: Sammy Reavis

OPERATION PERMIT by: Date: 10/08/15

Existing System Inspected by: Date:

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