# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 179986

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

PIN # 4777419812

APPLICANT: David Bear APPLICANT ADDRESS: 170 State Park Rd Troutman NC 28166

SITE ADDRESS: 747 Swann Rd Statesville NC 28625 PHONE: 704-777-3049 ALT. PHONE: N/A

SITE DIRECTIONS: Hwy 64 E T/L Swann Rd property on corner of Swann & Cool Springs

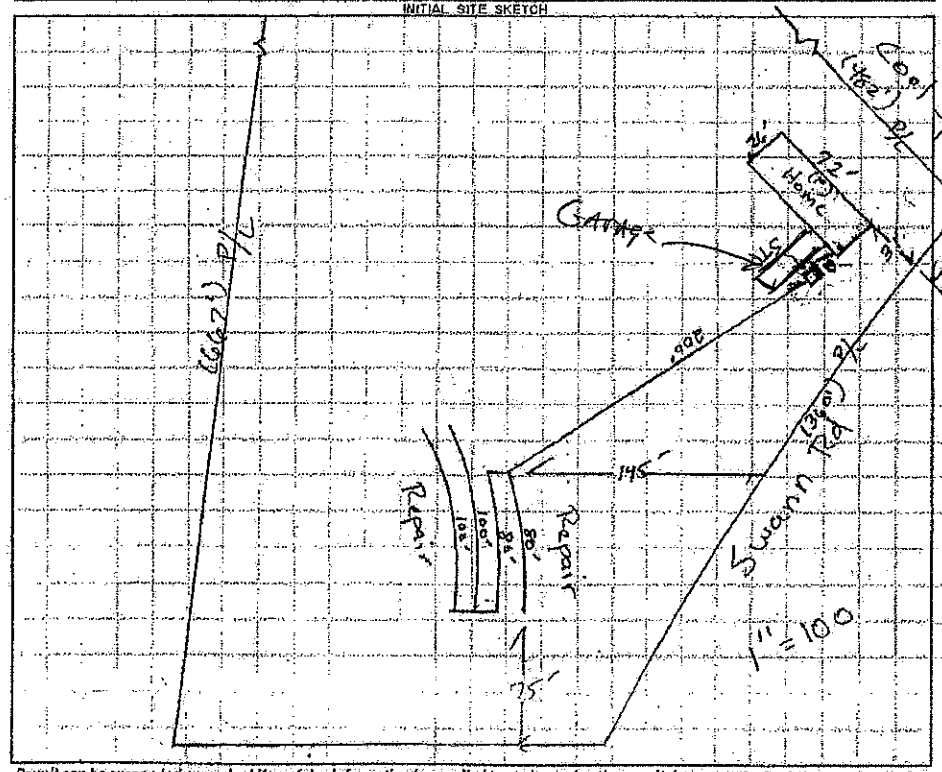
SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: DESIGN FLOW: 360 L.T.A.R.: 0.25

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | Date | [X] New System | [ ] Repair | [ ] Expansion | System Type: I II (III) IV V VI | [X] Residence | No. Bedrooms 3 |
| Pump Tank | (gal) | PT | Date | System Description: | 25% Reduction | | | [ ] Business | No. Persons 6 |
| Pump Make | | Model | Serial # | Repair System Description: | 25% Reduction - pump | | | [ ] Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft: 360 | Maintenance Agreement Required: | [ ] YES | [X] NO | [ ] Slab | [X] Crawl Space |
| Trench Width | 36" | Max. Trench Bottom Depth | 36" | Gravel Depth N/A | [X] GRAVITY | [ ] PRESSURE | | [ ] Basement w/plumbing | [ ] Basement w/o plumbing |

Water Supply: [ ] Private [X] Public [ ] Community

Comments / Conditions: Install 25% Reduction on Contour with Serial distribution

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. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

[ ] IMPROVEMENT PERMIT with plat valid without expiration. [X] IMPROVEMENT PERMIT with site plan valid for 60 mos. [X] AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: David A Bear Date:

IMPROVEMENT PERMIT by: Robert A Lyon Date: 03/06/14

AUTHORIZATION TO CONSTRUCT by: Robert A Lyon Date: 03/06/14

Installed by:

OPERATION PERMIT by: Date:

Existing System Inspected by: Date:

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