IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 209094

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

PIN # 4777512752

APPLICANT: Richard Roper APPLICANT ADDRESS: 342 Oswalt Amity Rd

SITE ADDRESS: 847 Cool Springs Rd Statesville NC PHONE: 704-239-3693 ALT. PHONE: N/A

SITE DIRECTIONS: 64E T/L Swann Rd property on right at end of Swann & Cool Springs

SUBDIVISION: N/A SECTION: N/A LOT # N/A LOT AREA: 1.44ac DESIGN FLOW: 360 L.T.A.R.: 0.25

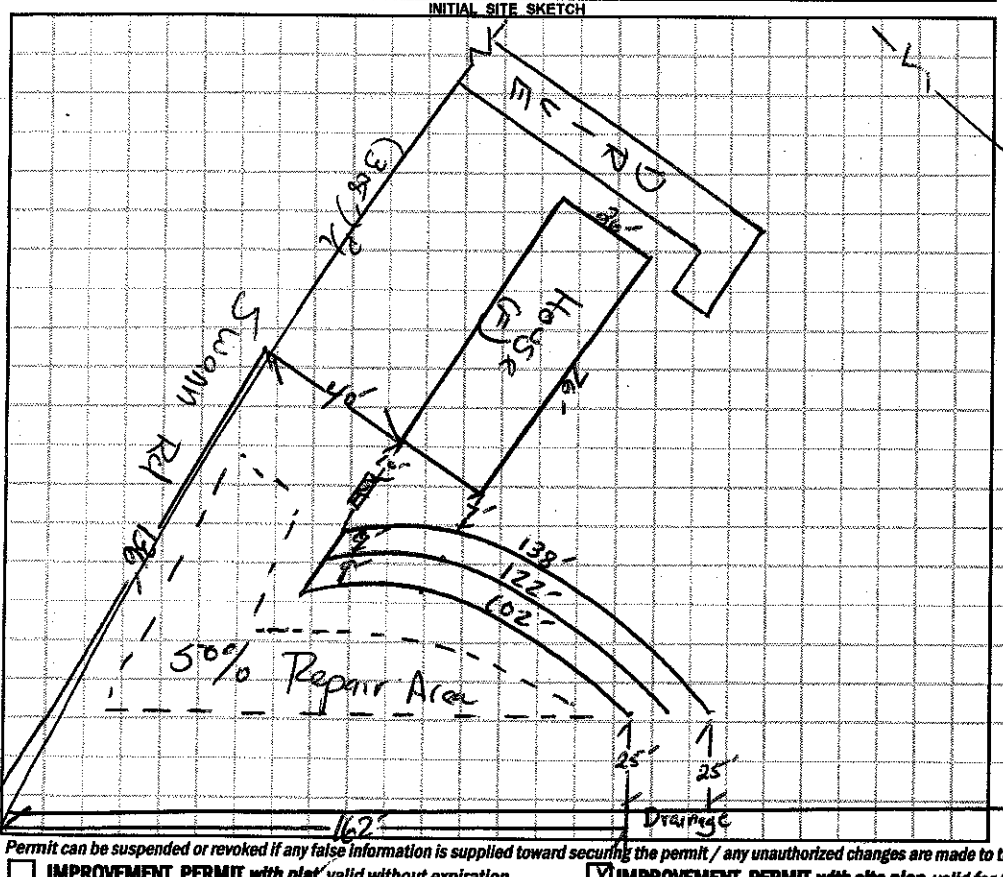
Septic Tank	1000 (gal)	STB	760	Date	3-22-15	[X] New System	[ ] Repair	[ ] Expansion	System Type: I II [III] IV V VI
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:	25% Reduction		
Pump Make	N/A	Model	Poly Tank	Serial #	PL-68	Repair System Description:	50% Reduction		
# Nitrification Fields	1	# Lines	3	Linear Ft:	368	Maintenance Agreement Required:	[ ] YES	[X] NO	
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A		[X] GRAVITY	[ ] PRESSURE	

[X] Residence No. Bedrooms 3
[ ] Business No. Persons 6
[ ] Other No. Employees
[ ] Slab [X] Crawl Space
[ ] Basement w/plumbing [ ] Basement w/o plumbing

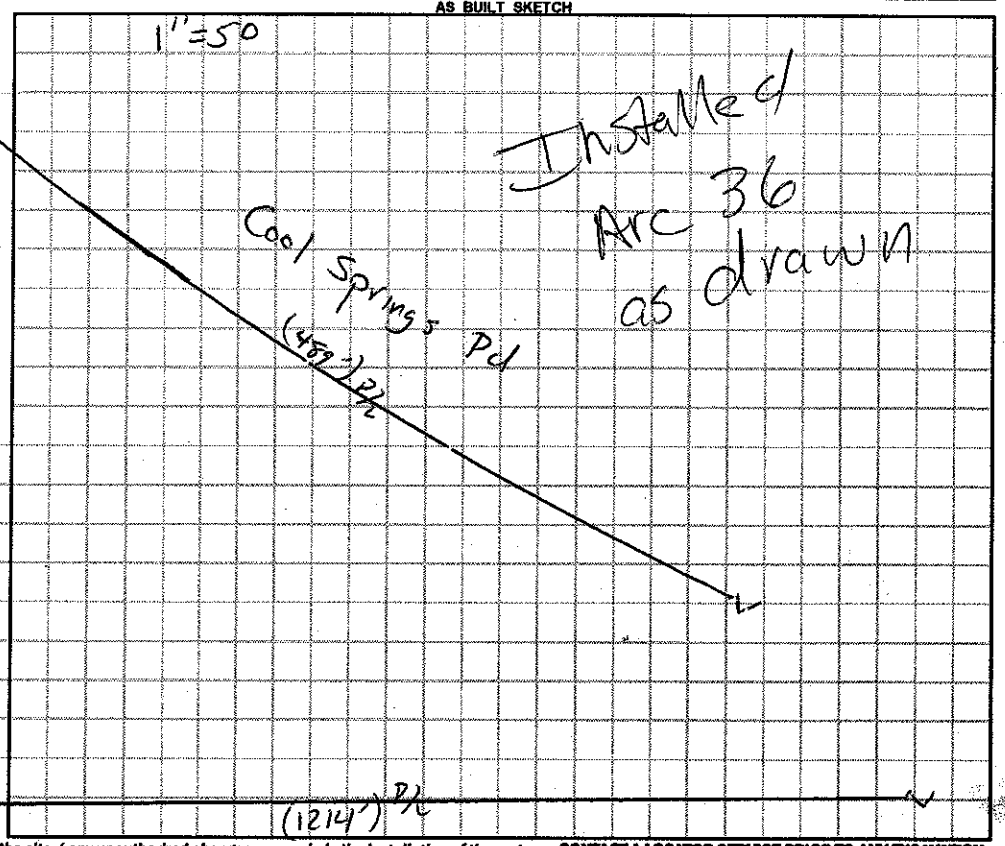
Water Supply: [ ] Private [X] Public [ ] Community

Comments / Conditions: Install 25% reduction on contour with serial distribution. Maintain positive drainage over field when covered

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: Deena Alvey Date: 5/7/15 Installed by: Abeal's Grading

IMPROVEMENT PERMIT by: Date: 05/07/15 OPERATION PERMIT by: Date: 05/28/15

AUTHORIZATION TO CONSTRUCT by: Date: 05/07/15 Existing System Inspected by: Date:

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