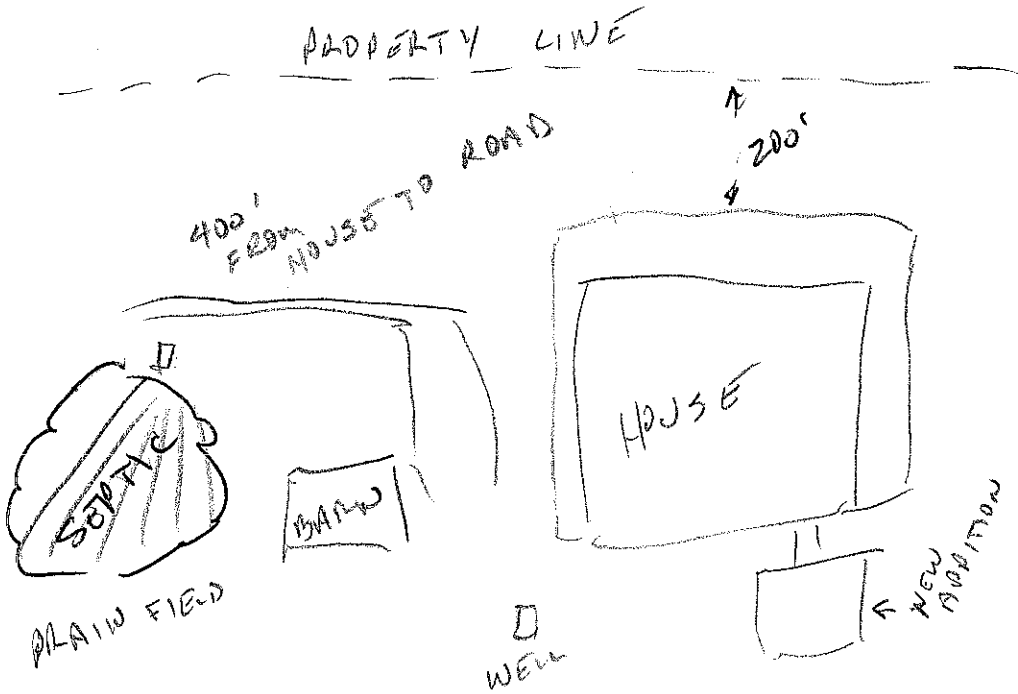


20 AC

PROPERTY LINE

808 ELMWOOD RD

STATESVILLE, NC 28625

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 90453 PIN# 4783087418 DATE 9-14-00

OWNER OR CONTRACTOR Dennie Haley PHONE: Business _____ Home 873 7097

ADDRESS 778 Elmwood Rd Statesville, N.C.

LOCATION 64 E TR Barry Oak Rd TR Elmwood 1mi Rt.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 20 acres SITE CLASS. P3 DESIGN FLOW 360 L.T.A.R. .2

Septic Tank: 1000 Gallons; STB 1012 Date 10-1-2000
Pump Tank: 1000 Gallons; PT [illegible] 17 Date 10-10-2000
Pump Make: Gould Model WE07124 Serial No. K808203
Nitrification Field: No Fields 4 Square Feet 1400 Linear Feet 600
No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I. II. III. IV. V. VI
System Description: Pump To Comm. Lines
Repair System Description: " " " "
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

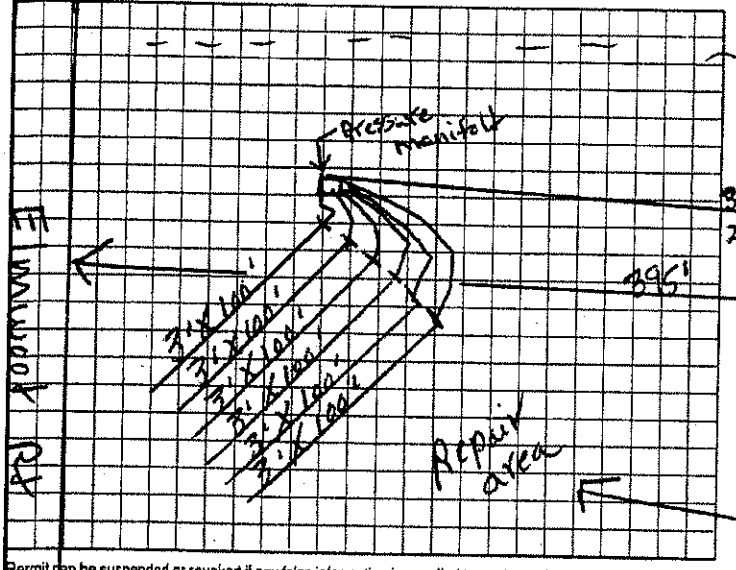
☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2 1/2
☐ Business No. Employees ____
☐ Other _____

Water Supply: ☒ Individual ☐ Public ☐ Community

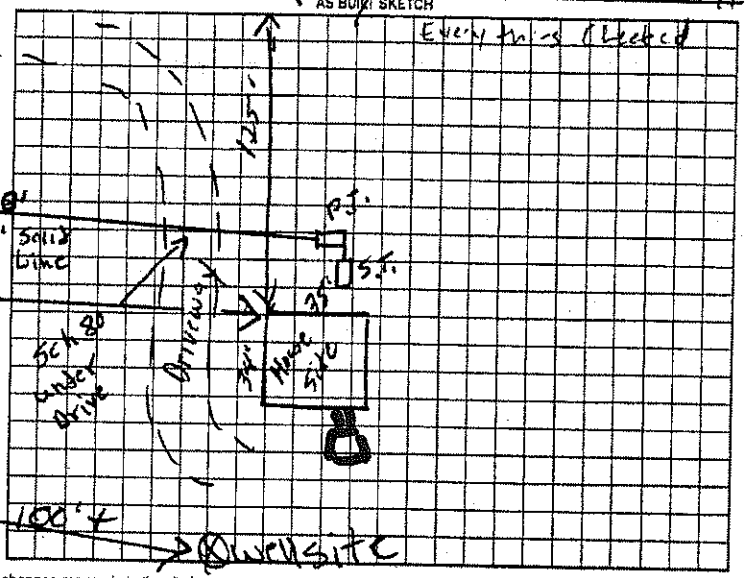
Comments/Conditions: See Attached Drawings For Pump Tank Setup & Pressure Manifold

Comments/Conditions: SYSTEM INSTALLED AS SHOWN WITH POLYLOK FILTER & RISERS

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 plan 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: Dennie Haley date 9-20-00 Installed by: YOUNTZ GRADING

Improvement Permit by: P.C. Moore date 9-14-00 Operation Permit by: Jim Cook RSI date 3-28-01

Authorization to Construct by: P.C. Moore date 9-14-00 Existing System Inspection by: _____ date _____

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