IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (01) MOORESVILLE 704-664-5281

(1) IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 116668 PIN# 4786-78-9583 DATE 1-22-04

OWNER OR CONTRACTOR JOHN'S WELDING INC PHONE: Business 704-871-1332 Home 704-873-7885

ADDRESS 1516 MOCKSVILLE HIGHWAY STATESVILLE NC 28625

LOCATION US 64 EAST, HOUSE ON RIGHT ACCESS FROM COOL SPRINGS ROAD AT BOX #2040

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.83 ACRES SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1500 Gallons; STB 421 Date 12-8-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. 284
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 270
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 25% REDUCTION, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth N/A ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

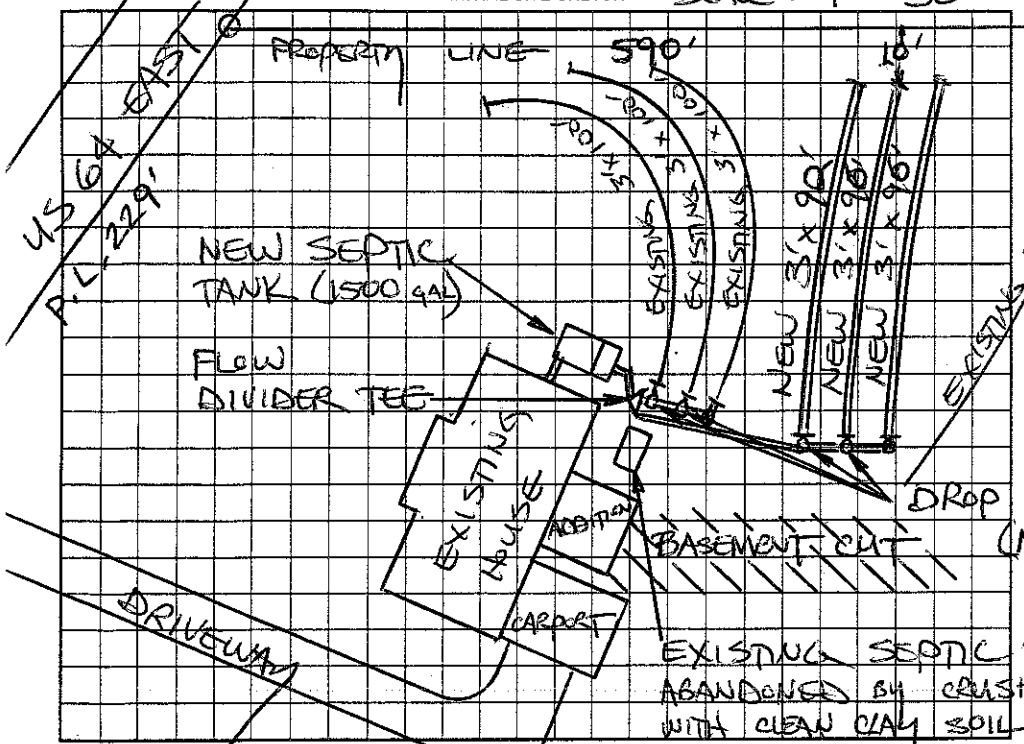
☑ House/Mod. Home No. Bedrooms 5
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☐ Individual ☑ Public ☐ Community

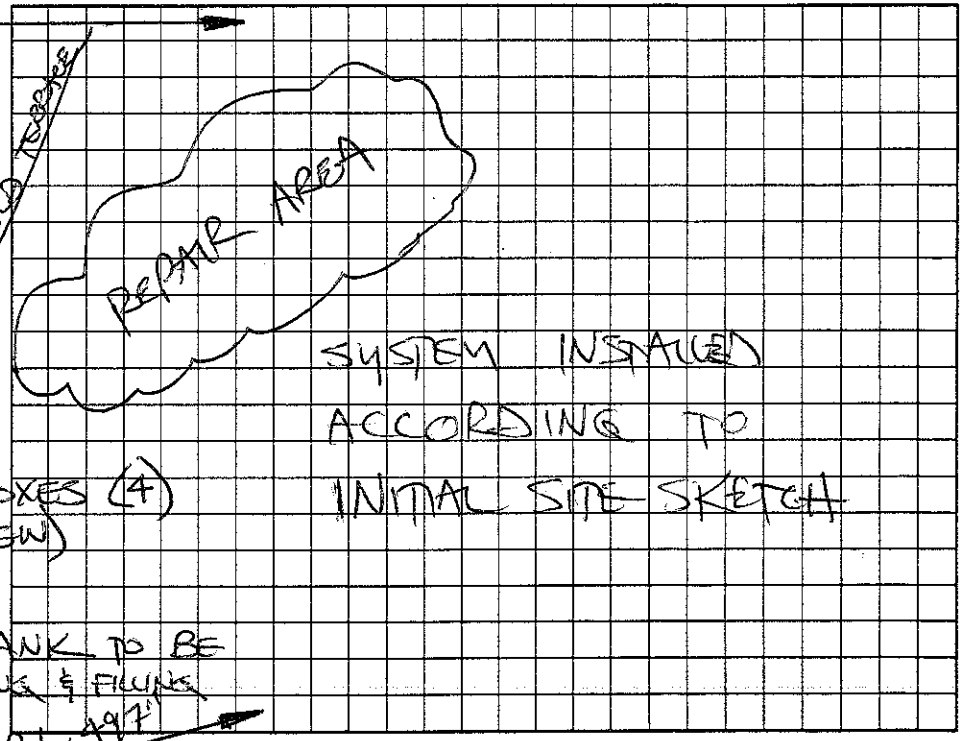
Comments:/Conditions: BASEMENT PLUMBING TO BE DELIVERED VIA "GRINDER" PUMP (ALREADY INSTALLED)

Comments:/Conditions: (2) SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER (2) SYSTEM INSTALLED USING 284' AT 3.8 EQUIVALENCY FACTOR "QUICK 4 INFILTRATOR" CHAMBERS

INITIAL SITE SKETCH SCALE: 1" = 50'



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 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: Denise Angel date 1-23-04

Improvement Permit by: STEVE HEDRICK date 1-22-04

Authorization to Construct by: STEVE HEDRICK date 1-23-04

Installed by: MARTY TUCKER

Operation Permit by: STEVE HEDRICK date 2-20-04

Existing System Inspection by: _____ date _____

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