IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

RA BN

PERMIT # 222965

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

PIN # 4788-36-0213.101

APPLICANT: Marjorie Cartner APPLICANT ADDRESS: 2288 Old Mocksville Rd Statesville

SITE ADDRESS: 101 Vaughn Mill Rd. Statesville, NC 28625 PHONE: 704546-7348 ALT. PHONE:

SITE DIRECTIONS: I-40 East from Statesville → L on Old Mocksville Rd → R on Vaughn Mill Rd → Lot/House on Left

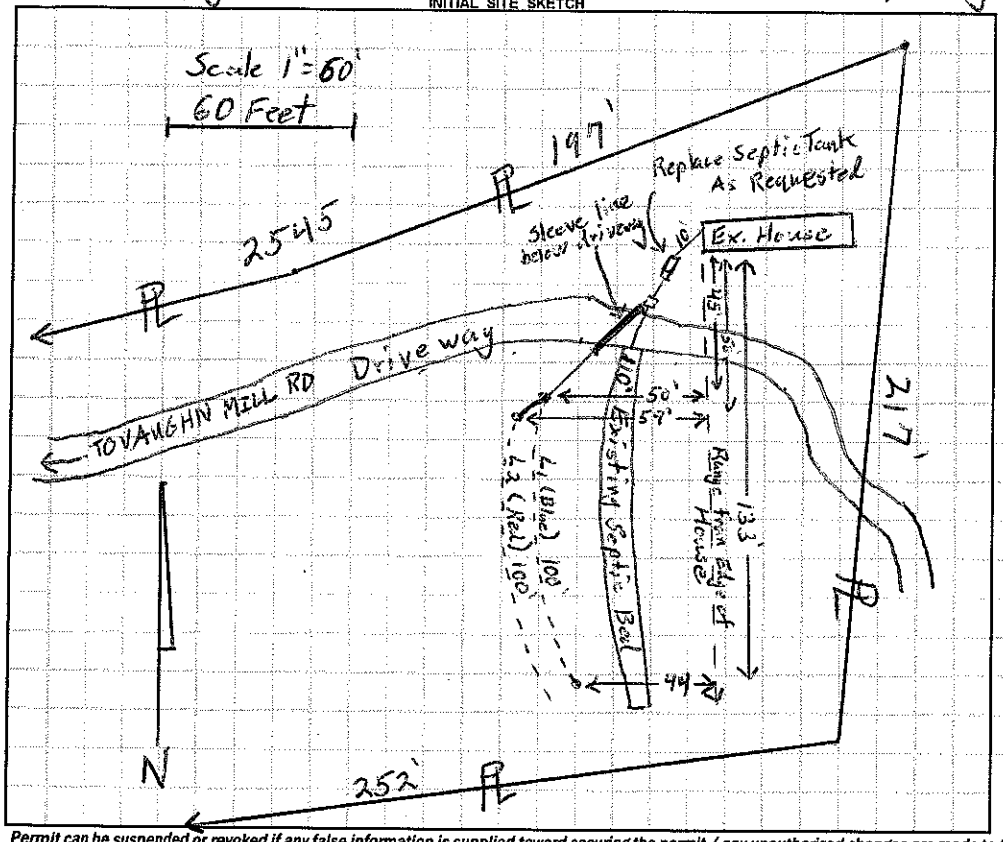
SUBDIVISION: — SECTION: — LOT # — LOT AREA: ≈1.36 acres DESIGN FLOW: 240 GPD L.T.A.R.: 0.30

Septic Tank	1000	(gal)	STB		Date		☐ New System	☒ Repair	☐ Expansion	System Type: I II (III) IV V VI	
Pump Tank	—	(gal)	PT	—	Date	—	System Description:				
Pump Make	—	Model	Dolphin		Serial #	DL-68	Repair System Description:	Replace Septic tank as requested			
# Nitrification Fields	1	# Lines	2		Linear Ft:	200'	Maintenance Agreement Required:	☐ YES	☒ NO + Drainfield Area	☒ GRAVITY	☐ PRESSURE
Trench Width	36"	Max. Trench Bottom Depth	32" Low sided		Gravel Depth	—					

☒ Residence	No. Bedrooms	3	Water Supply		
☐ Business	No. Persons	4	☐ Private		
☐ Other	No. Employees		☒ Public		
☐ Slab	☒ Crawl Space		☐ Community		
☐ Basement w/plumbing			☐ Basement w/o plumbing		

Comments / Conditions: Follow all N.C. septic rules. Existing septic tank must be pumped, limed (interior surfaces) and either 1) crushed in place 2) Hauled away or 3) Filled with self leveling clean fill (sand, gravel or cement). At time of evaluation, existing drainfield appeared mostly dry + working properly. It is likewise recommended that the conveyance line between the septic tank + field be snaked + any crushed pipe replaced. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as drawn

no tail lines added

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: Matt Cartner Date: 11/21/16 Installed by: Lantz Wastewater

IMPROVEMENT PERMIT by: Tom Shuck Date: 11/17/16 OPERATION PERMIT by: [signature] Date: 12/12/16

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 11/17/16 Existing System Inspected by: Date:

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