IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125816 PIN# 4810-89-9163 / 4810-99-4131 DATE 4-19-05

OWNER OR CONTRACTOR CLINTON PETTIT PHONE: Business (704) 495-1192 Home (704) 876-3265

ADDRESS 3954 WILKESBORO HWY STATESVILLE NC 28625

LOCATION HWY 115 N TL CROSS COUNTRY TL STAN LN 3RD MH ON RT (138 STAN LN)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.001 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.40 gpd/ft²

Septic Tank: 1000 Gallons; STB 1007 Date 7-12-05

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. 240

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 4 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: ~~CONVENTIONAL~~ GRAVITY

Repair System Description: PUMP 25% REDUCTION

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

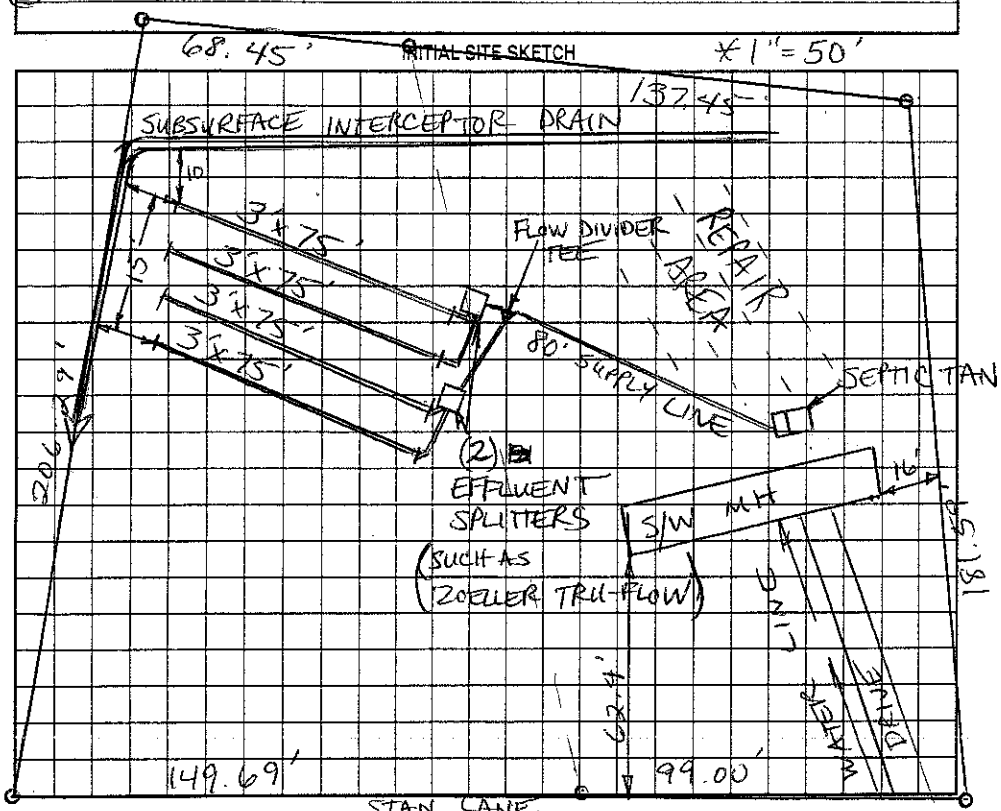
☐ Other _____

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

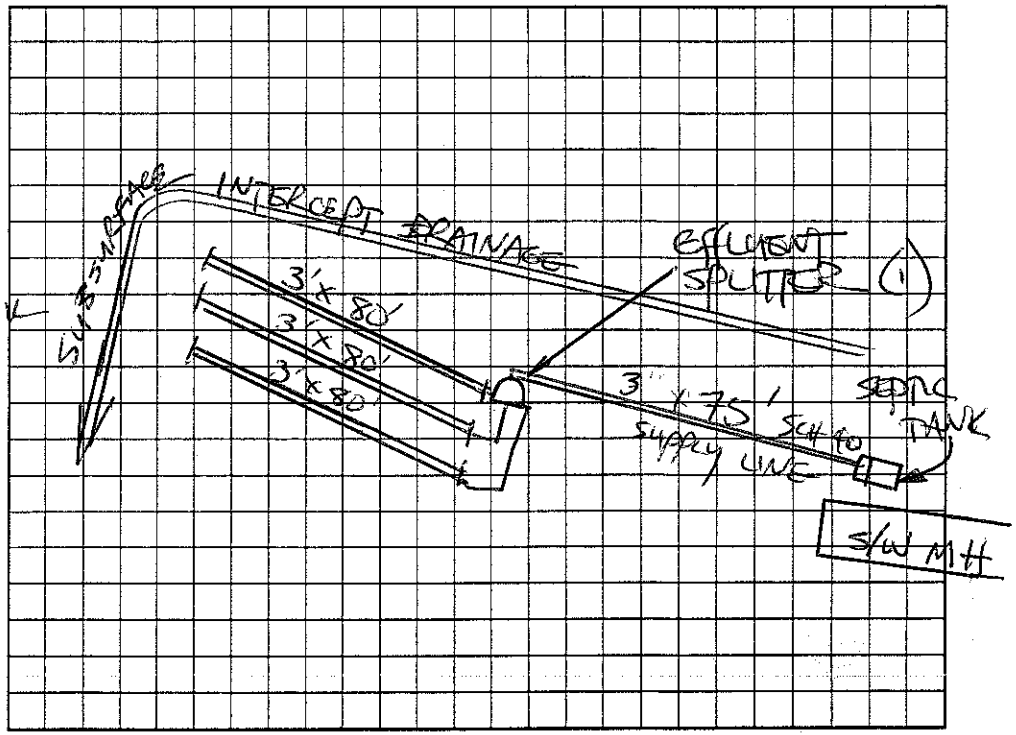
Comments/Conditions: ① INSTALL LINES 24" ON CONTOUR
② INSTALL SUBSURFACE INTERCEPTOR DRAIN 36" TO DAYLIGHT
③ MAINTAIN SETBACKS

INITIAL SITE SKETCH



Comments/Conditions: ① AN "ACCEPTED" SYSTEM WAS INSTALLED USING 24 EZ-FLO SECTIONS
② SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER

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: _____ date _____

Improvement Permit by: Christopher M. Sherrill REHS date 4-19-05

Authorization to Construct by: Christopher M. Sherrill (RW) date 4/29/05

Installed by: JAMES HUDER

Operation Permit by: STEVE HEDRICK date 7-18-05

Existing System Inspection by: _____ date _____

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