IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 110931 PIN# 4811-63-5316.B 5561 DATE 5-8-03

OWNER OR CONTRACTOR CRYSTAL SIMMONS PHONE: Business 704-872-6411 Home 704-876-2211

ADDRESS 151 BEAGLE LANE, STATESVILLE, NC 28625

LOCATION NC 115 NORTH, TL CROSS COUNTRY ROAD, TR BEAGLE LANE, LOT ON LEFT AT END

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 10 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.40GPD/FT2

Septic Tank: 1000 Gallons; STB 1007 Date 4-15-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields L Square Feet EQ.TO 1200 Linear Feet 300
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 20" / 30" Gravel Depth N/A

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

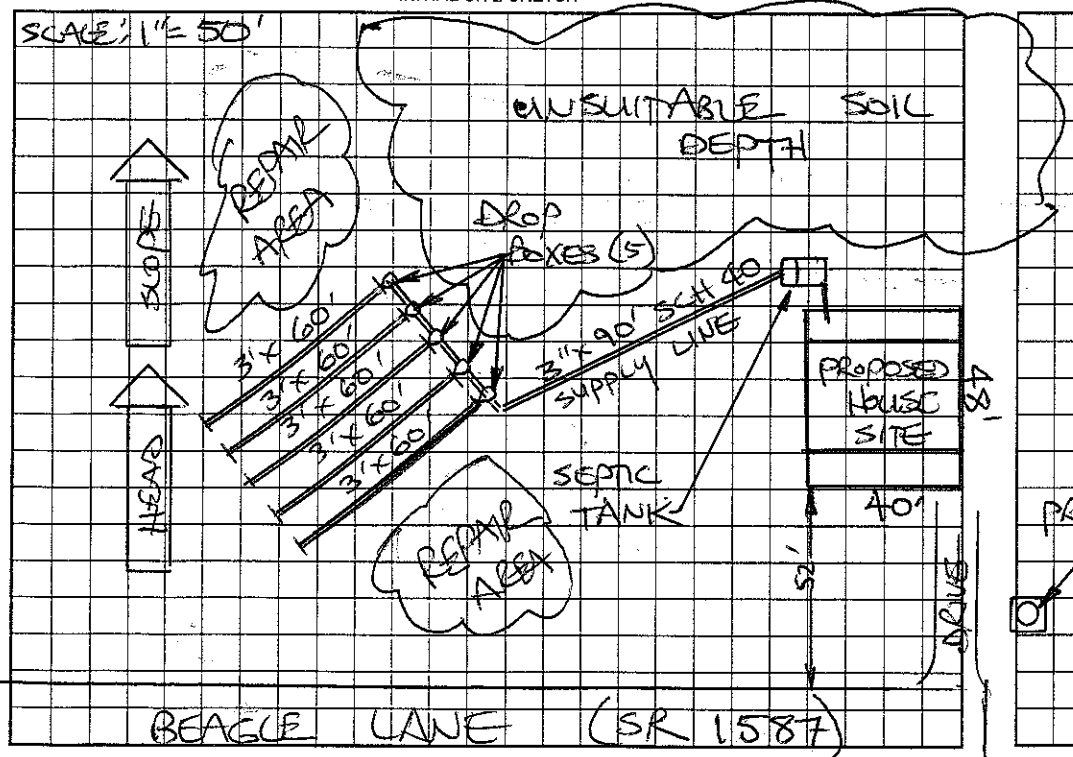
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

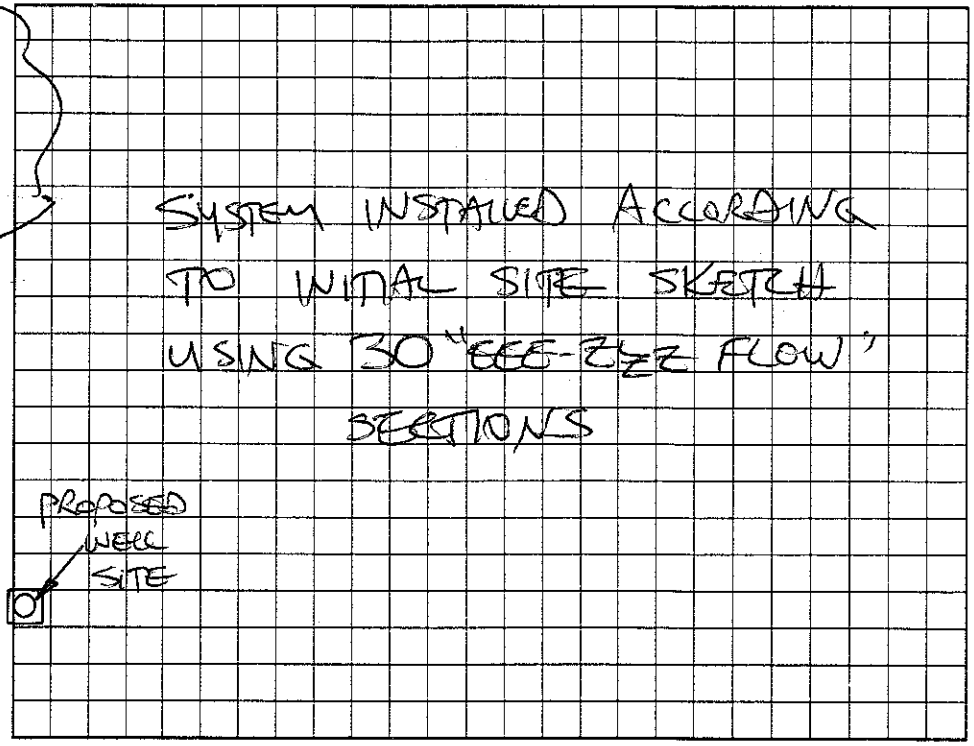
Comments:/Conditions: ① INSTALL TRENCHES NO DEEPER THAN 20" (LOWER SIDE) 30" (UPPER SIDE) ② USE 25% REDUCTION SYSTEM ③ KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "PolyLok" FILTER

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 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: Spence P. Dagenhardt date 5-12-03 Installed by: JAMES HUBLER

Improvement Permit by: STEVE HEDRICK date 5-8-03 Operation Permit by: STEVE HEDRICK date 5-26-04

Authorization to Construct by: STEVE HEDRICK date 5-8-03 Existing System Inspection by: _____ date _____

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