IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (21) MOORESVILLE 704-664-5281

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

PERMIT# 13105 PIN# 4814-94-7511 DATE 9-20-05

OWNER OR CONTRACTOR D & S DEVELOPMENT COMPANY PHONE: Business 828-328-5246 Home 704-592-2308

ADDRESS P.O. BOX 1616, STATESVILLE, NC 28677

LOCATION NC 115 NORTH, TR, ZEB ROAD, 1ST BUILDING ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 120.15 ACRES SITE CLASS. PS DESIGN FLOW 300 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB 1000 Date 4-15-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

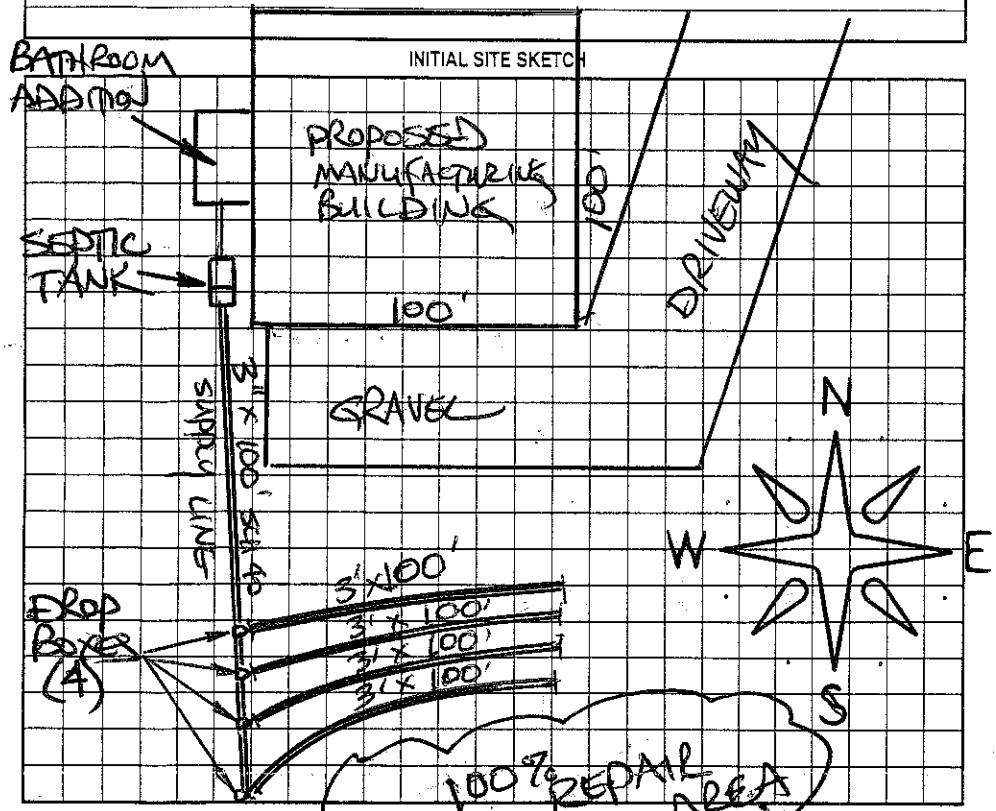
☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms ____
☐ Mobile Home No. Bathrooms ____
☑ Business No. Employees 12
☐ Other INDUSTRY - MFG
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Public
☐ Community
WELL

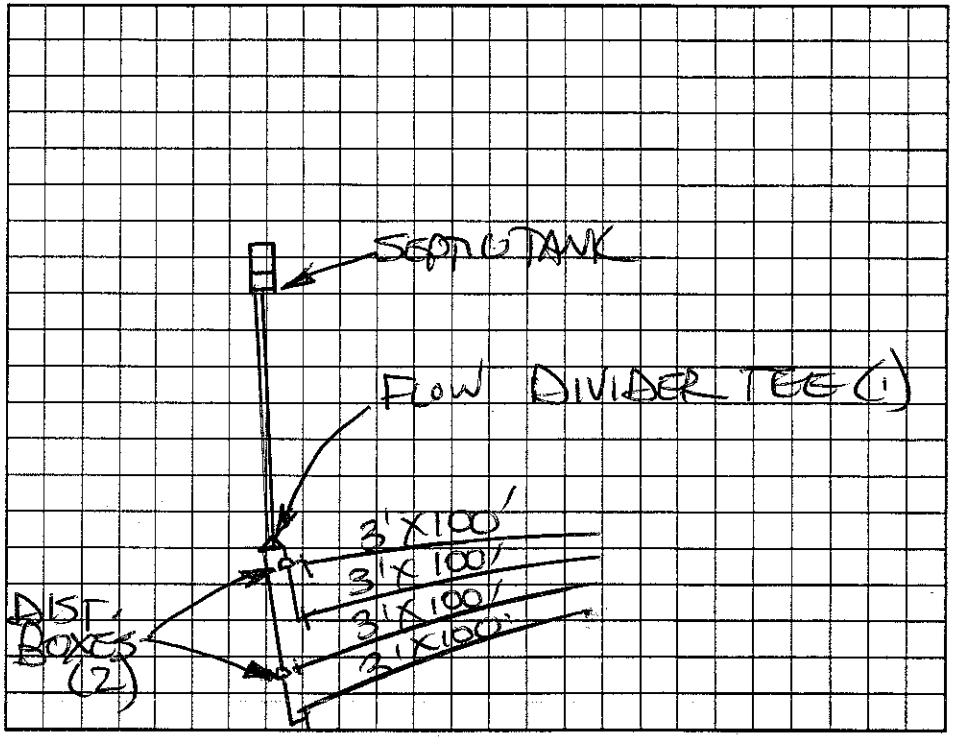
Comments:/Conditions: NO VEHICULAR TRAFFIC ALLOWED OVER SEPTIC TANK AND DRAINFIELD.

INITIAL SITE SKETCH



Comments:/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "ZABEL" FILTER DISTRIBUTION ALTERED AS SHOWN WITHOUT PRIOR HEALTH DEPARTMENT APPROVAL

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 9-20-05 Installed by: JAMES HOWARD

Improvement Permit by: STEVE HENDRICK date 9-20-05 Operation Permit by: STEVE HENDRICK date 12-27-05

Authorization to Construct by: STEVE HENDRICK date 9-20-05 Existing System Inspection by: _____ date _____

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