IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 134170 PIN# 4820-78-6154 DATE 3-28-06

OWNER OR APPLICANT BONNIE WAGNER PHONE: Business Home 704-876-4268

ADDRESS 436 TUCKERS GROVE RD Statesville NC 28625

LOCATION 115 N @ TUCKERS GROVE RD ON RT PAST BOX # 436

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.750 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 10-15-05
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet E.D.=1200' Linear Feet 300'
No Lines 3X100 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 62AV 25% REDUCTION
Repair System Description: LP 50% REDUCTION
Maintenance Agreement Required: ☐ Yes ☒ No
☒ Gravity ☐ Pressure

☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Persons 6
☐ Business No. Employees
☐ Other

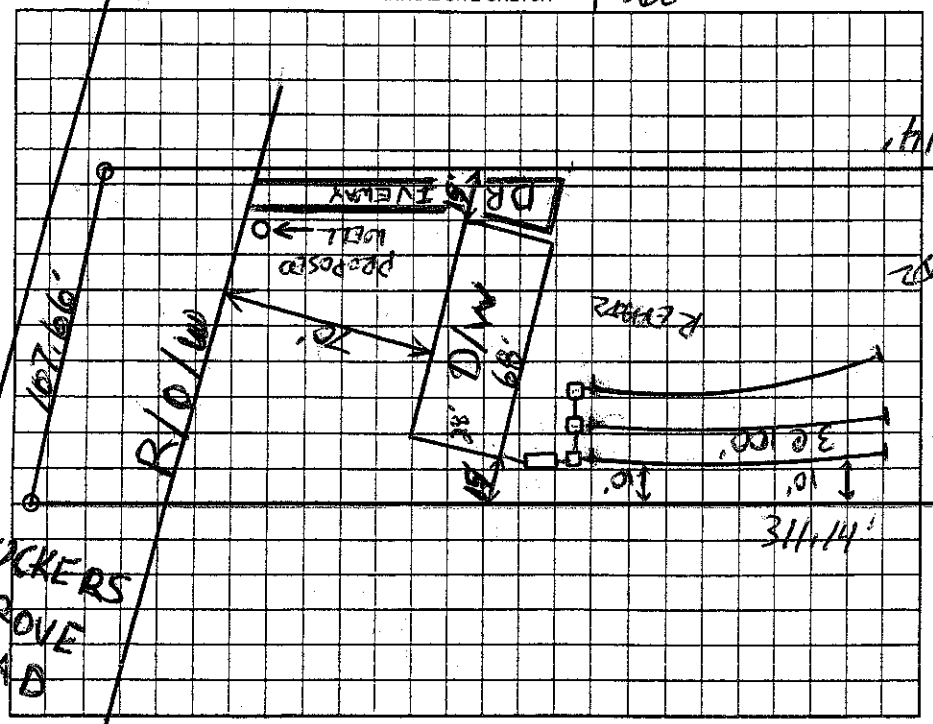
Water Supply: ☒ Individual ☐ Public ☐ Community

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

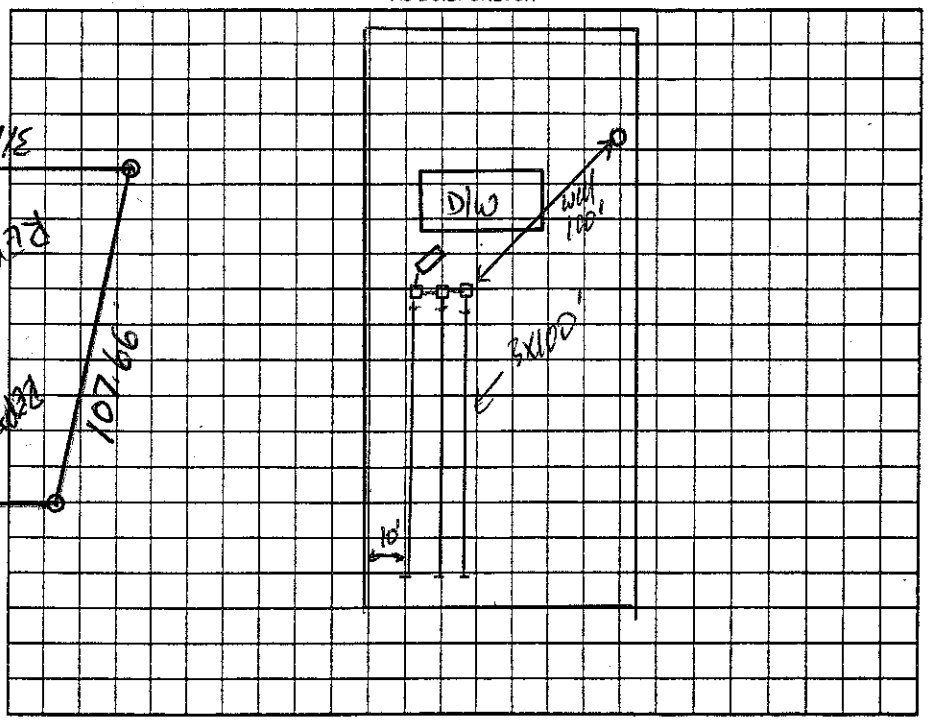
Comments:/Conditions: (1) INSTALL LINES AT 36" DEEP DUE TO BIG ROOT & STUMP REMOVAL (2) INSTALL LINES ON CONTOURS & MAINTAIN SETBACKS (3) CALL PRIOR TO INSTALLATION FOR FLAG OUT

Comments:/Conditions: TUFF TIKE Filter Jansen

INITIAL SITE SKETCH 1"=60'



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 3/28/06 Installed by: CLARK THOMPSON

Improvement Permit by: date 3-28-06 Operation Permit by: date 5-24-06

Authorization to Construct by: date 3-28-06 Existing System Inspection by: date

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