IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # Repair PIN # ~~4810-11-4461~~ 004072 DATE 2-12-09

OWNER or APPLICANT Susan Fox PHONE: Business Home:

OWNER or APPLICANT ADDRESS 142 Fox Bottoms Rd

LOCATION / DIRECTIONS (N) on Jenning (L) on Friendship ~2 miles on (L) 595 Friendship

SUBDIVISION n/a BLOCK / SECTION n/a LOT # n/a LOT AREA n/a DESIGN FLOW 360 L.T.A.R. .25

Septic Tank 1000 Gallons: STB 1007 Date 1-6-9

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 4 Linear Feet 360

Trench Width 36" Max. Trench Bottom Depth 30" Gravel Depth n/a

☐ New System ☒ Repair ☐ Expansion System Type I II (III) IV V VI

System Description:

Repair System Description: 25% Reduction

Maintenance Agreement Required ☐ YES ☐ NO

☐ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3 ☐ Business No. Persons ☐ Other No. Employees

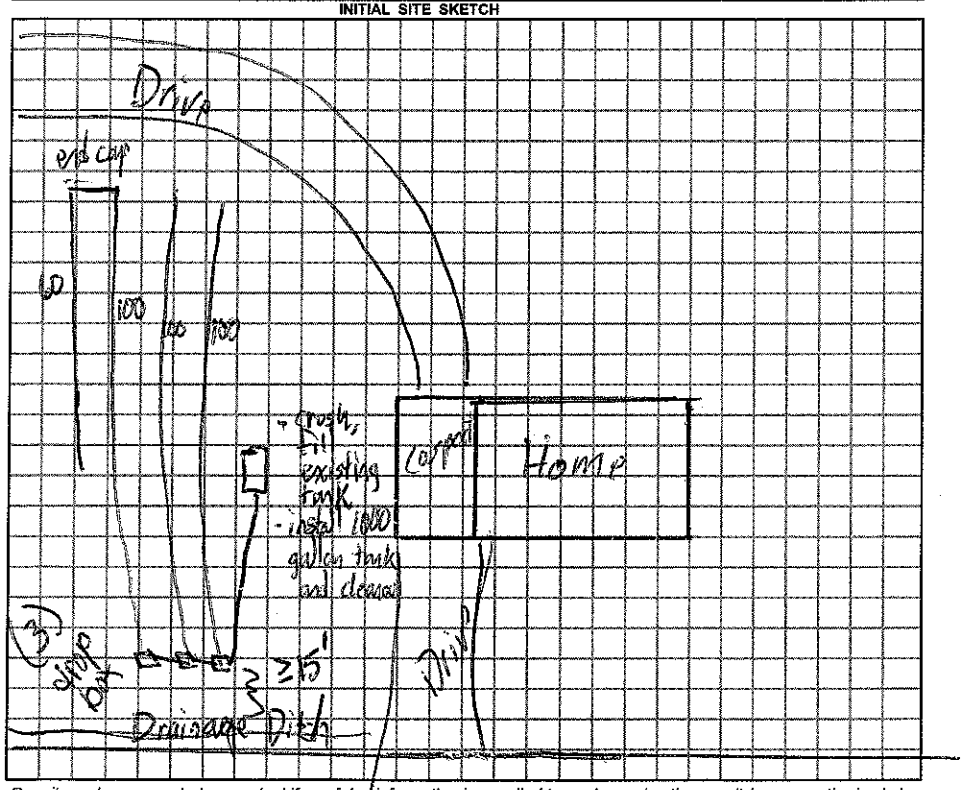
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

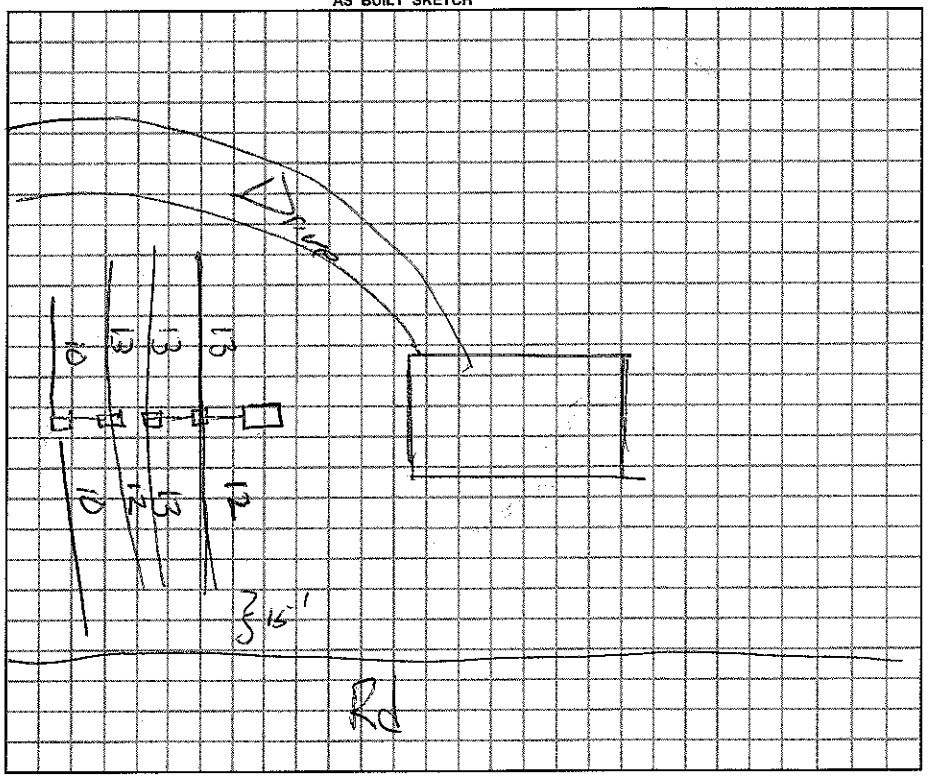
Comments / Conditions

Comments / Conditions

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 w / plat valid without expiration.* ☒ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☒ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Norrin Fox Date

Improvement Permit by: Date 2-12-09

Authorzation to Construct by: Date 2-12-09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Tim Coll

Operation Permit by: Date: 3-10-9

Existing System Inspected by: Date:

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant