IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

(C1) **IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION**

PERMIT# 105799 PIN# ~~4840-69-1656-B~~ 4840-59-7305 DATE 5-6-02

OWNER OR CONTRACTOR STEVE R. WAGNER PHONE: Business 704-881-0704 Home 704-878-9230

ADDRESS 2260 SALISBURY HWY, STATESVILLE, NC 28677

LOCATION US 21 N, TL JENNINGS RD, TL HOLBROOK ROAD, 0.3 MILE ON RIGHT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 gpd/ft2

Septic Tank: 1000 Gallons; STB 794 Date 10-3-01
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 86" 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

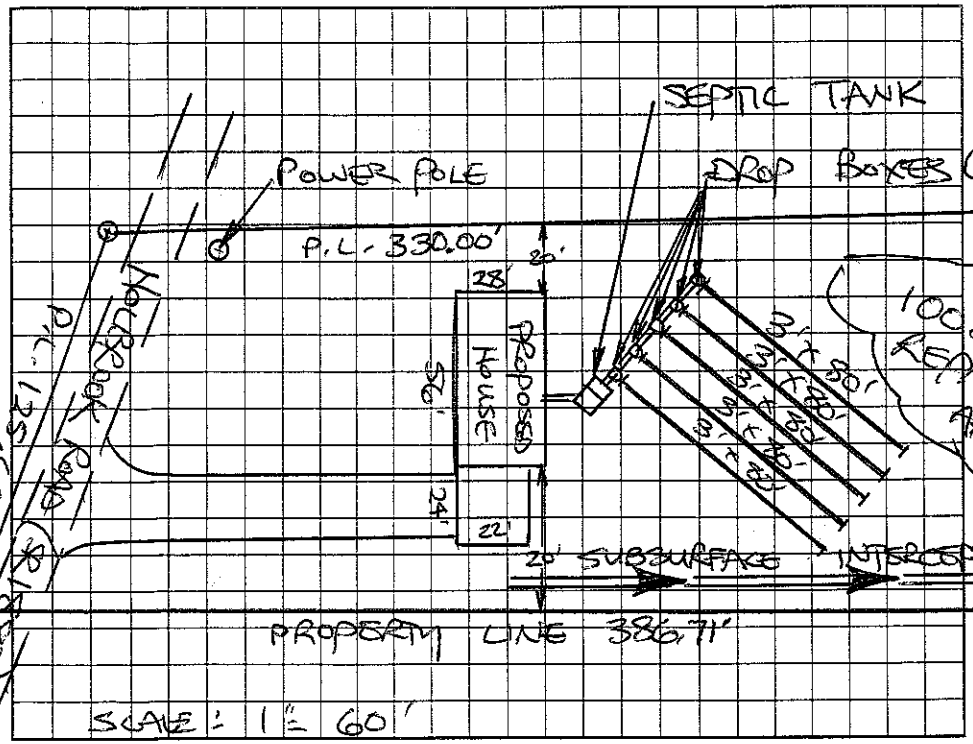
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

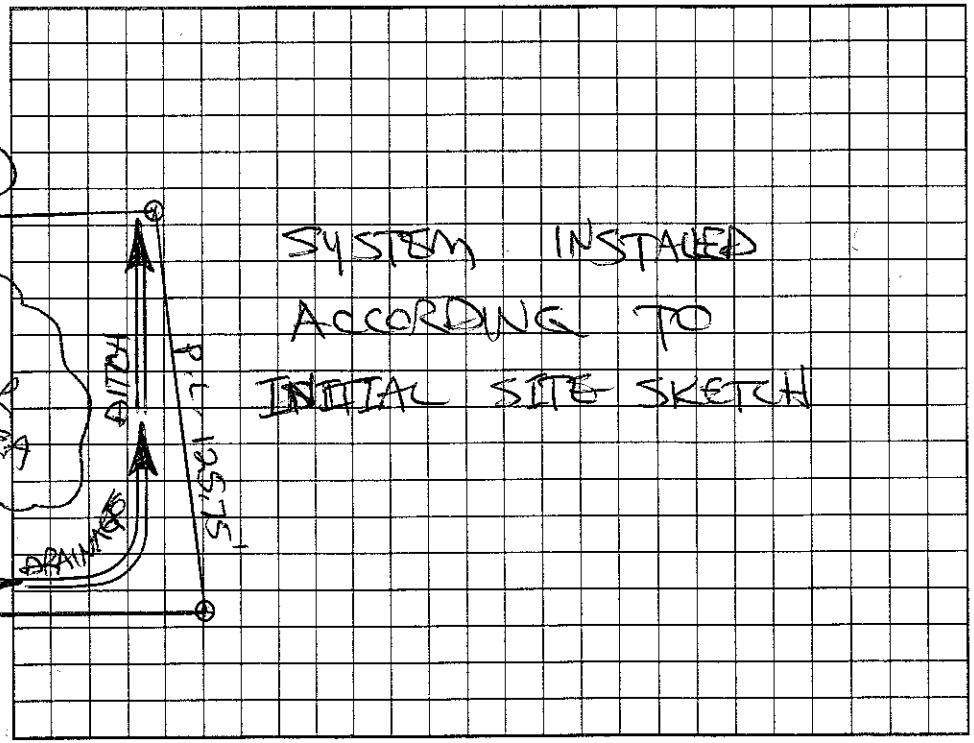
Comments:/Conditions: INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 48" DEEP OUT TO DAYLIGHT

Comments:/Conditions: SEPTIC TANK INSTALLED USING RISERS & MARKER WITH "FABEL" 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: Steve Wagner date 5-6-02 Installed by: KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 5-6-02 Operation Permit by: STEVE HEDRICK date 6-27-02

Authorization to Construct by: STEVE HEDRICK date 5-6-02 Existing System Inspection by: _____ date _____

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