IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 092643 PIN# 4860 74 7993 DATE 10-25-00

OWNER OR CONTRACTOR WILLIAM MARLOW PHONE: Business _____ Home 878-0110

ADDRESS 124 EMMA LANE, STATESVILLE, NC 28625

LOCATION 45 21 N, TL TABOR ROAD, TR ASHFORD ROAD, LOT # 14 ON LEFT

SUBDIVISION HOLLY RIDGE BLOCK / SECTION II LOT 14 LOT AREA 0.73 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT

Septic Tank: 1000 Gallons; STB 1012 Date 9-20-00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines SIX 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: 25% REDUCTION PUMP
Maintenance Agreement Required: ☐ Yes ☑ No

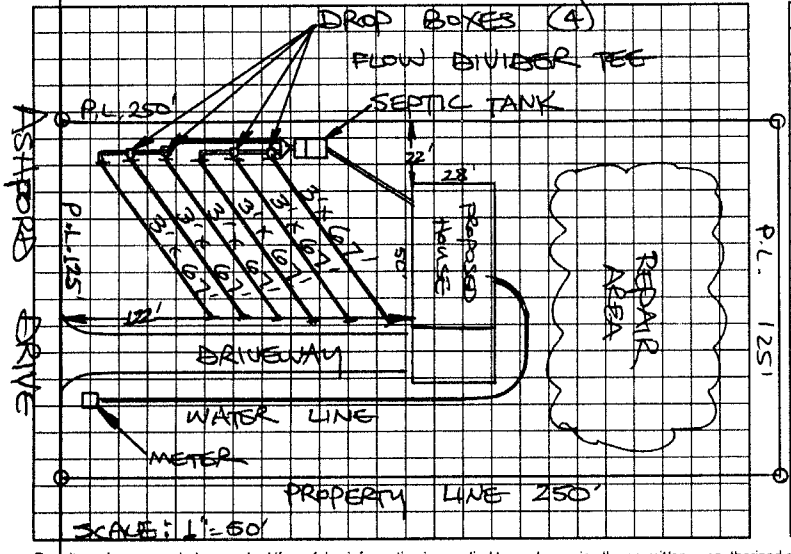
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: ① KEEP SYSTEM MINIMUM TEN FEET FROM WATER LINE ② USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SERIES OF DROP BOXES

Comments/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLY LOK" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE 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: William T Marlow date 10-25-00 Installed by: STEVE JORDAN

Improvement Permit by: STEVE HEDRICK date 10-25-00 Operation Permit by: STEVE HEDRICK date 1-17-01

Authorization to Construct by: STEVE HEDRICK date 10-25-00 Existing System Inspection by: _____ date _____

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