IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 147974 PIN# ~~4861-32-4652-3026~~ 4861-32-2722 DATE 2-6-08

OWNER OR APPLICANT WESLEY COMMUNITY DEV. CORP PHONE: Business 704-924-8942 Home 704-902-5603

ADDRESS 1321-C DIXIE DRIVE, STATESVILLE, NC 28677

LOCATION US21-N, TL TABOR RD, TL SPEAKS ROAD, TL DEMILLE DR, TL PADGETT FARMS LANE, 1ST ON LEFT

SUBDIVISION PADGETT FARMS BLOCK / SECTION ____ LOT 26 LOT AREA 0.514 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 2-4-08
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ TO 1440 Linear Feet 360
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II ⓘ IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 50% REDUCTION, LOW-PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other ____

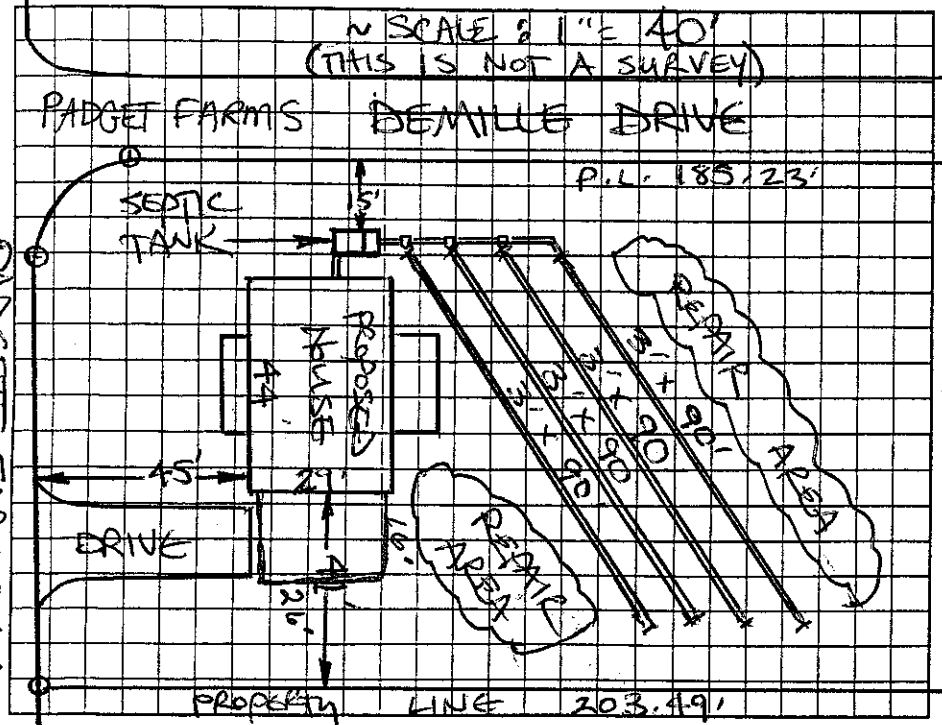
Water Supply: ☐ Individual ☑ Public ☐ Community

☑ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

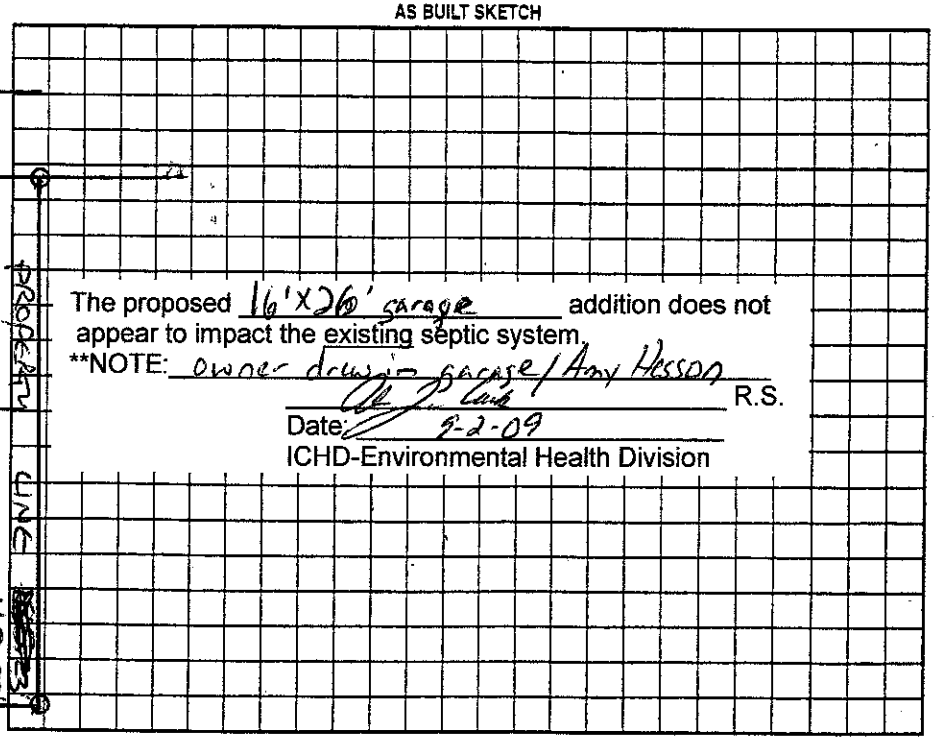
Comments/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN

Comments/Conditions: BROWN

INITIAL SITE SKETCH



AS BUILT SKETCH



The proposed 16'X36' garage addition does not appear to impact the existing septic system.
**NOTE: owner drawing garage / Amy Hesson
R.S.
Date: 5-2-09
ICHD-Environmental Health Division

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 2-7-08
Improvement Permit by: STEVE HEDRICK date 2-6-08
Authorization to Construct by: STEVE HEDRICK date 2-6-08
Installed by: Tommy Cothren
Operation Permit by: ____ date 3-18-08
Existing System Inspection by: ____ date ____

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