4-30

(CT)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 139403 PIN# 4786338108 704-902-0399 DATE 7 December 06

OWNER OR APPLICANT Howe Building, Inc. PHONE: Business ~~704-902-0399~~ Home 704-878-7224

ADDRESS 229 Cedarlake Drive, Statesville, N.C.

LOCATION ~77N TR Turn in Mill Rd. TL Tabor Rd. TL Sparks Rd. Lot on Left.

SUBDIVISION Peachtree Farms BLOCK / SECTION 2 LOT 25 LOT AREA 0.471 Ac. SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. 0.39 ft²/gpd

Septic Tank: 1000 Gallons; STB 1007 Date 7-25-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet ≈1200 Linear Feet 300
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 25% Reduction - Recycle
Repair System Description: 25% Reduction
Maintenance Agreement Required: ☐ Yes ☑ No

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

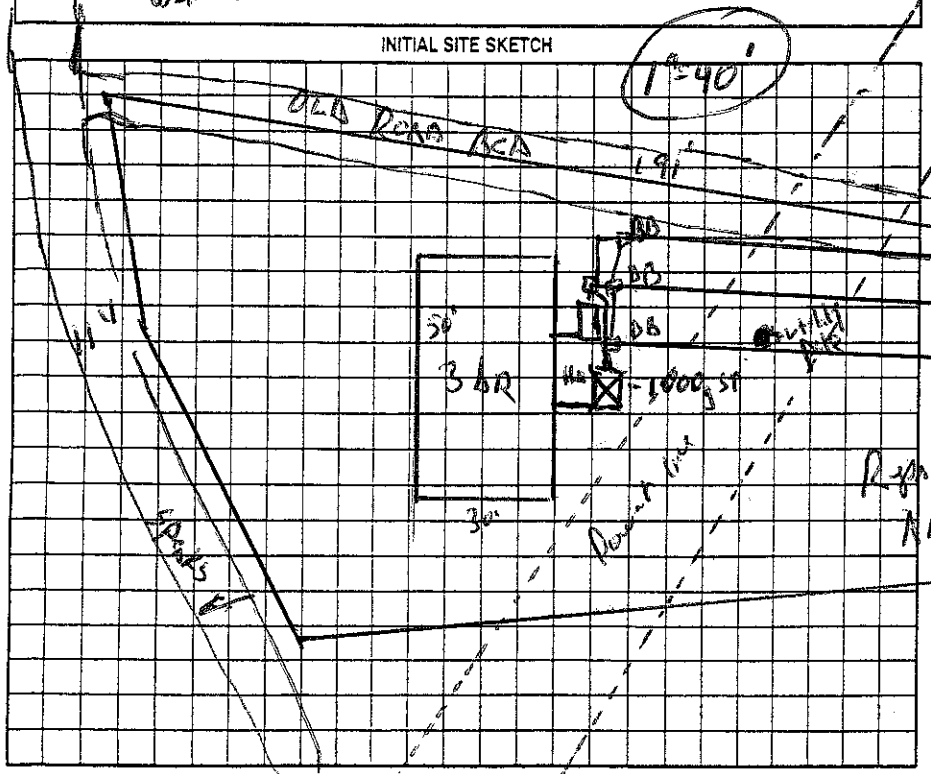
Water Supply: ☐ Individual ☑ Public ☐ Community

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

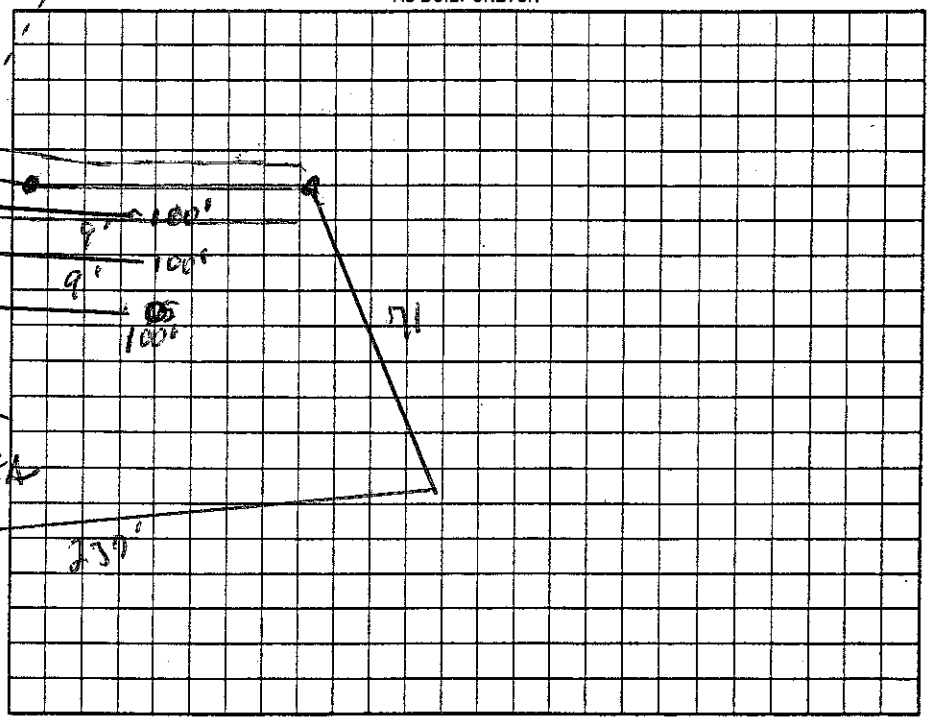
Comments:/Conditions: USE 3 drop-boxes / Follow contour / * Power lines to be relocated to front of lot. Old well

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 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 12-18-06 Installed by: Cothran & Son

Improvement Permit by: _____ R.S. date 14 Dec. 06 Operation Permit by: _____ date 9-19-07

Authorization to Construct by: _____ R.S. date 26 June 07 Existing System Inspection by: _____ date _____

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