WEST HOUSTONVILLE ROAD (SR 1833)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 087221 PIN# 4862 73 4261 DATE 1-12-00

OWNER OR CONTRACTOR RENEE BUCKWORTH PHONE: Business _____ Home 883-0943

ADDRESS 256 WATSIDE DRIVE, STATESVILLE, NC 28677

LOCATION US 21 N, TL NC 901, TR ALLEN ROAD, LOT AT END ON RIGHT (NEXT TO BOX #380)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 6.76 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 825 Date 12-9-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields I Square Feet 1440 Linear Feet 480
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: CONV. PUMP
Maintenance Agreement Required; ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

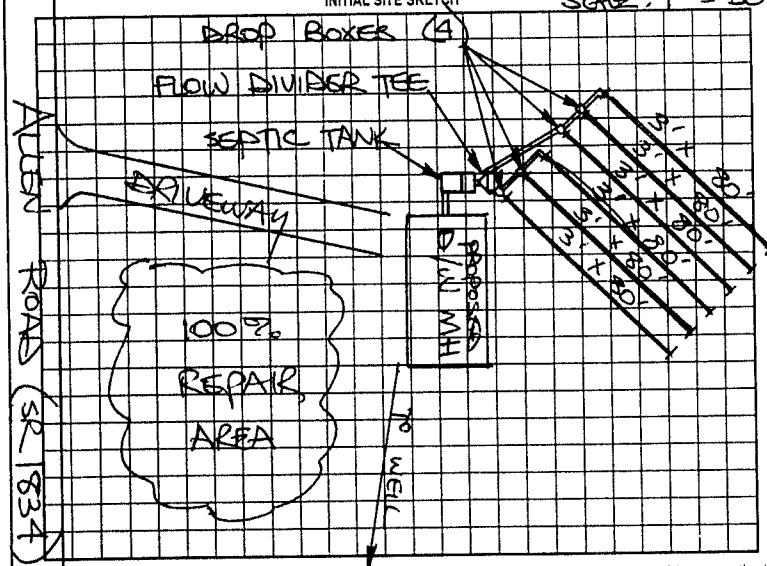
☑ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community WELL NEXT DOOR

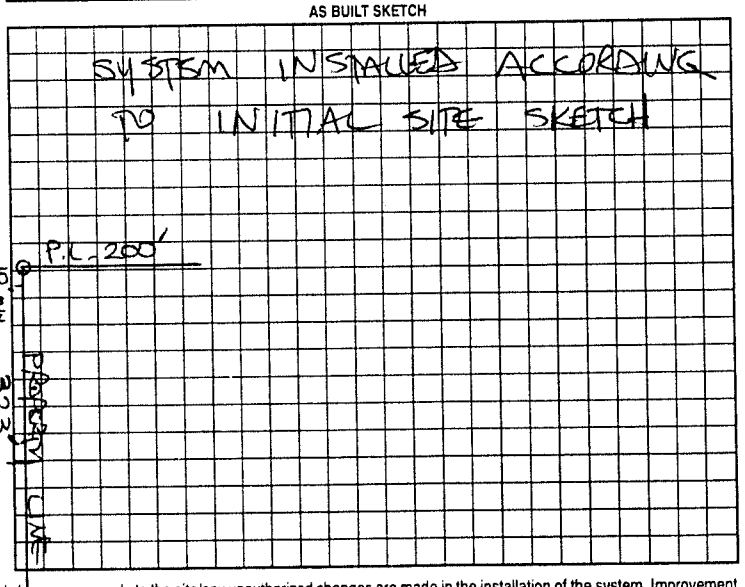
Comments:/Conditions: INSTALL ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES FEEDING THREE LINES EACH

Comments:/Conditions. SEPTIC TANK W/ RISERS INSTALLED USING "POLYLOK" FILTER.

INITIAL SITE SKETCH SCALE: 1" = 50'



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: [signature] date 1-12-00 Installed by: C & W GRADING

Improvement Permit by: STEVE HEDRICK date 1-12-00 Operation Permit by: STEVE HEDRICK date 2-8-00

Authorization to Construct by: STEVE HEDRICK date 1-12-00 Existing System Inspection by: _____ date _____

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