IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 153468 PIN # 4871074386 DATE 12-4-08

OWNER or APPLICANT Harvey L. Dalton PHONE: Business 704 871 2318 Home: 704 437 2147

OWNER or APPLICANT ADDRESS 413 Kimmon Rd.

LOCATION / DIRECTIONS Hwy 21N to 901, Turn (L)

SUBDIVISION Kimmon Estates BLOCK / SECTION ____ LOT # 6 LOT AREA .7 DESIGN FLOW 360 L.T.A.R. Ex

Septic Tank Ex Gallons: STB Ex Date Ex

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

Nitrification Field No Fields Ex No Lines Ex Linear Feet Ex

Trench Width Ex Max. Trench Bottom Depth Ex Gravel Depth Ex

☐ New System ☐ Repair ☐ Expansion System Type I (II) III IV V VI

System Description: Existing

Repair System Description: ____

Maintenance Agreement Required ☐ YES ☒ NO

☐ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons ____

☐ Other No. Employees ____

☐ Slab ☐ Crawl Space

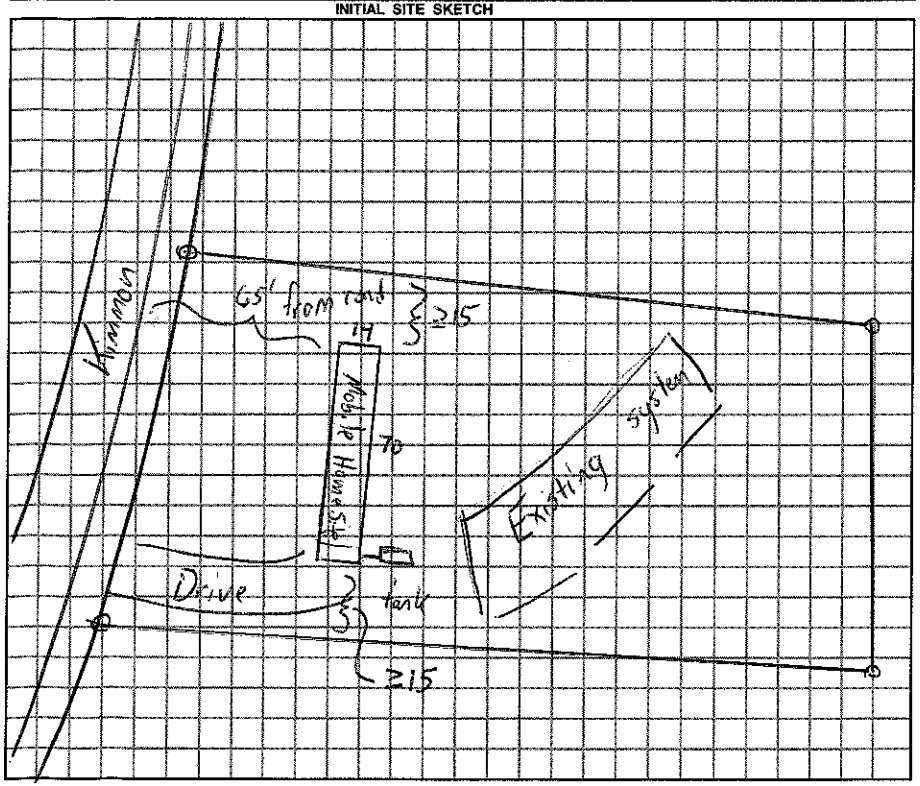
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Harvey Dalton Date 12-16-08 Installed by: ____

Improvement Permit by: ____ Date ____ Operation Permit by: ____ Date: ____

Authorization to Construct by: ____ Date ____ Existing System Inspected by: James Date: 12-4-08

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant