IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 134024 PIN# 3774825944 DATE 3-20-06

OWNER OR APPLICANT Edward Surratt PHONE: Business _____ Home 828 267 9926

ADDRESS 158 Ridge Point Dr.

LOCATION Sharon School Rd, left on Stewart Rock, left on Fulbright, right on Gardner Point, right on Ridge Point, lot on right

SUBDIVISION Riverwalk BLOCK / SECTION V LOT 8 LOT AREA 1.08 SITE CLASS. P5 DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 5-15-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines _____ Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% Reduction Gravity

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons _____

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth n/a ☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

The location of the proposed basement finish addition does not appear to impact the existing septic system.

**NOTE:

REHS

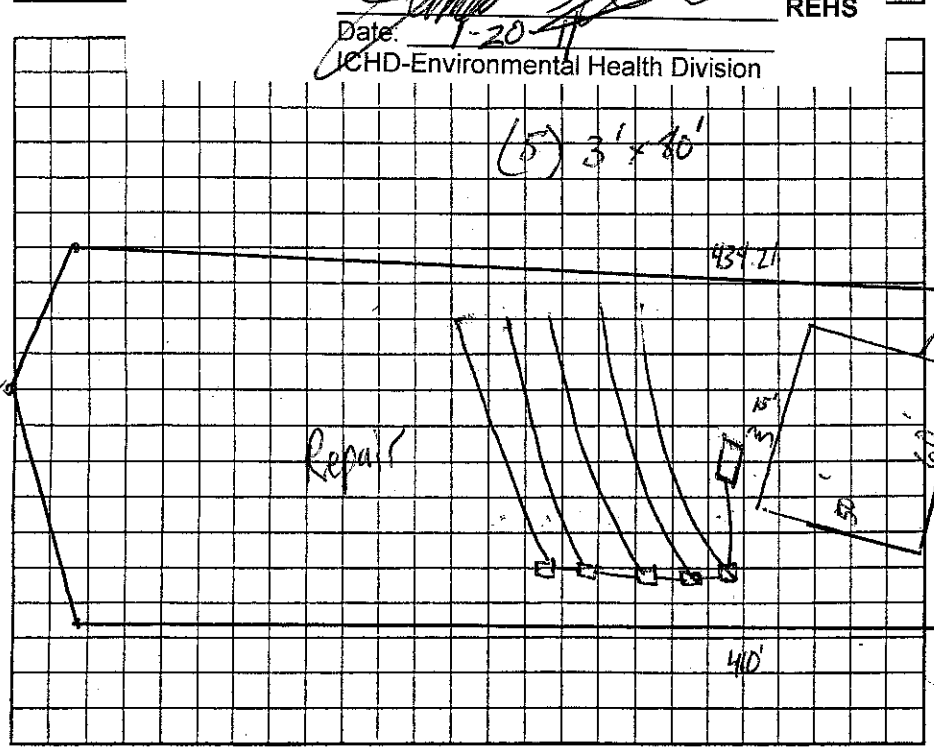
Date: 3-20-06

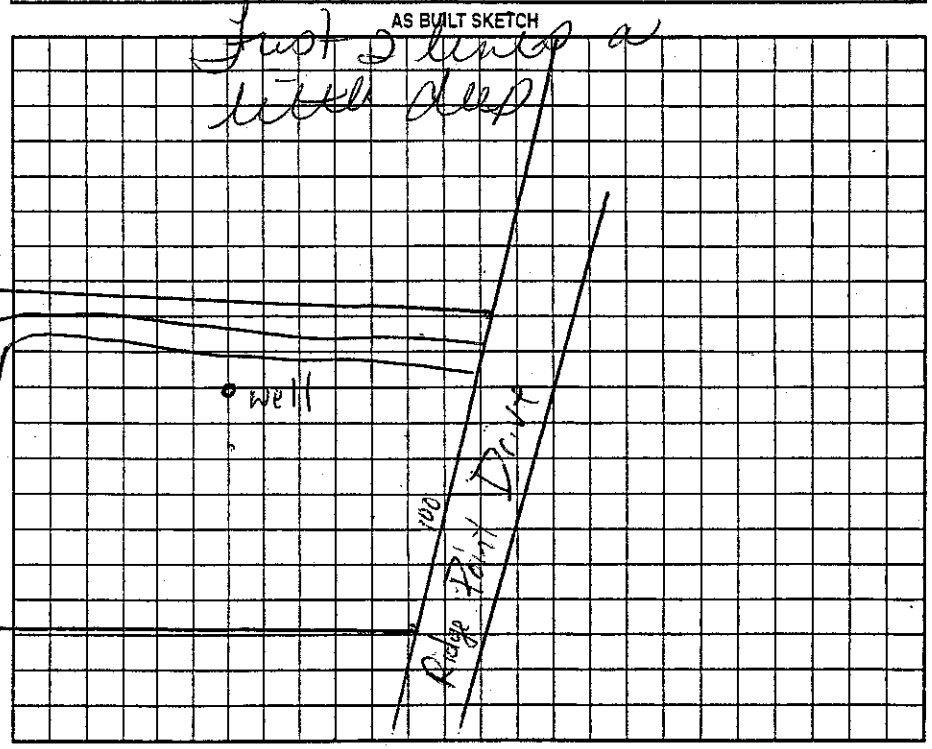
ICHD-Environmental Health Division

Comments:/Conditions:

Yellow Infiltrator Septic Tank Marker

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: Cindy Mayer date 4-5-06 Installed by: [illegible]

Improvement Permit by: [signature] date 3-20-06 Operation Permit by: [signature] date 11-17-06

Authorization to Construct by: [signature] date 3-27-06 Existing System Inspection by: _____ date _____

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