IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 136662 PIN# 3793-55-4201 DATE 6-29-06

OWNER OR APPLICANT MARLOW BUILDING PHONE: Business 704-878-0110 Home 704-838-0755

ADDRESS 129 EMMA LANE, STATESVILLE NC 28625

LOCATION MOCK MILL ROAD TO 'TITLEIST DRIVE' R TOP FLITE DRIVE 2ND LOT ON RIGHT

SUBDIVISION AUGUSTA GREENS BLOCK / SECTION II LOT 8 LOT AREA 0.576 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 2-28-06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No. Fields 1 Square Feet EQ. TO 1200 Linear Feet 200

No. Lines FOUR Trench Width 24" Max Trench Bottom Depth 36" SAND Depth 24"

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

System Description: 50% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION, PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons _____

☐ Business No. Employees _____

☐ Other _____

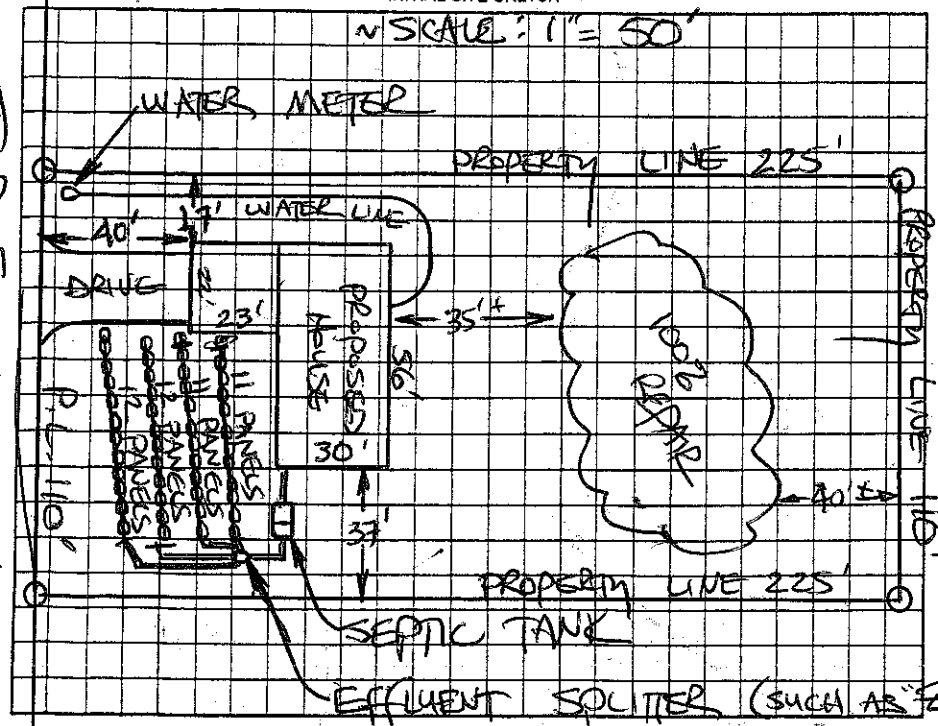
Water Supply: ☐ Individual ☑ Public ☐ Community

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

Comments/Conditions: ① INSTALL 50% REDUCTION SYSTEM USING 48 PPBPS PANELS ON CONTOUR AS SHOWN ② KEEP SYSTEM MINIMUM 25 FEET FROM ROAD DITCH

Comments/Conditions: ③ SCOUR TRENCH SIDEWALLS & APPLY A LIGHT DUSTING of LIME PRIOR TO INSTALLING SAND. Yellow Left to Septic-tank Maker

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: Tom Marlow date 6-29-06 Installed by: Steve Jordan

Improvement Permit by: STEVE HEDRICK date 6-29-06 Operation Permit by: Kelly Poole date 10-12-06

Authorization to Construct by: STEVE HEDRICK date 6-29-06 Existing System Inspection by: _____ date _____

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