IREDELL COUNTY HEALTH DEPARTMENT STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT # 157334 PIN # 4614975334 DATE 7-13-09

OWNER or APPLICANT Jim Allen/Hands 4 Hire PHONE: Business Cassi Moore 704 962-2413 Home: 704 201-5842

OWNER or APPLICANT ADDRESS 20823 N. Main Cornelius, NC 28031

LOCATION / DIRECTIONS Brawley School Rd TR Tuskarora Tr. TR Balmoral on left 4th house from end #191

SUBDIVISION Meck Meck / CLAT BLOCK / SECTION C6 LOT # 232 LOT AREA .5 Ac. DESIGN FLOW _____ L.T.A.R. _____

Septic Tank Exist Gallons: STB _____ Date _____

Pump Tank Exist Gallons: P T _____ Date _____

Pump Make _____ Model _____ Serial # _____

Nitrification Field No Fields ____ No Lines ____ Linear Feet _____

Trench Width _____ Max. Trench Bottom Depth 24" ± Gravel Depth _____

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

System Description: Exist. Grav. Conv.

Repair System Description: _____

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3 ☐ Business No. Persons ____ ☐ Other No. Employees ____

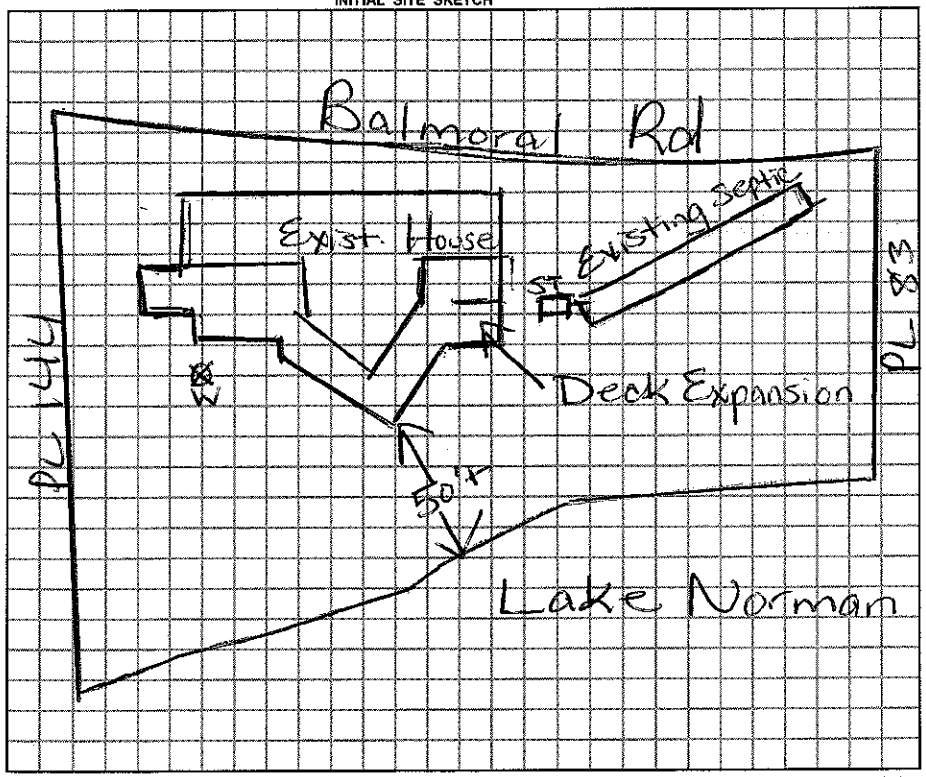
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Existing Septic Appears to be Functioning Okay at time of inspection

Not to Scale

INITIAL SITE SKETCH



Comments / Conditions: Keep deck addition at least 5Ft from Septic. Deck should not impact existing Septic System.

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: _____ Date 7/14/09

Improvement Permit by: Maria H. Dolan RS Date 7/13/09

Authorzation to Construct by: Maria H. Dolan RS Date 7/13/09

Installed by: _____

Operation Permit by: _____ Date: _____

Existing System Inspected by: Maria H. Dolan RS Date: 7/13/09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

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