IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 083333 PIN# 4616808342 DATE 10/26/99

OWNER OR CONTRACTOR Tom Fitzpatrick PHONE: Business Charles Humphrey 309-3416 Home (704) 552-6452

ADDRESS 5700 Bellechasse St. Charlotte, NC 28210

LOCATION Brawley School Rd TR Chuckwood Tr 2nd Barber Loop on left (473 Barber Loop)

SUBDIVISION ELTJ BLOCK / SECTION 7 LOT 93 LOT AREA 1.13 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 10/26/00

Pump Tank: 1600 Gallons; PT 283 Date 11/6/00

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900' Linear Feet 300'

No Lines 4 at 75' Trench Width 36" Max Trench Bottom Depth 36"

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI

System Description: Pump(pm) - 25% Reduction*

Repair System Description: Modified

Maintenance Agreement Required: [ ] Yes [X] No

Gravel Depth N/A

[X] House/Mod. Home No. Bedrooms 3

[ ] Mobile Home No. Bathrooms 3

[ ] Business No. Employees ____

[ ] Other _____

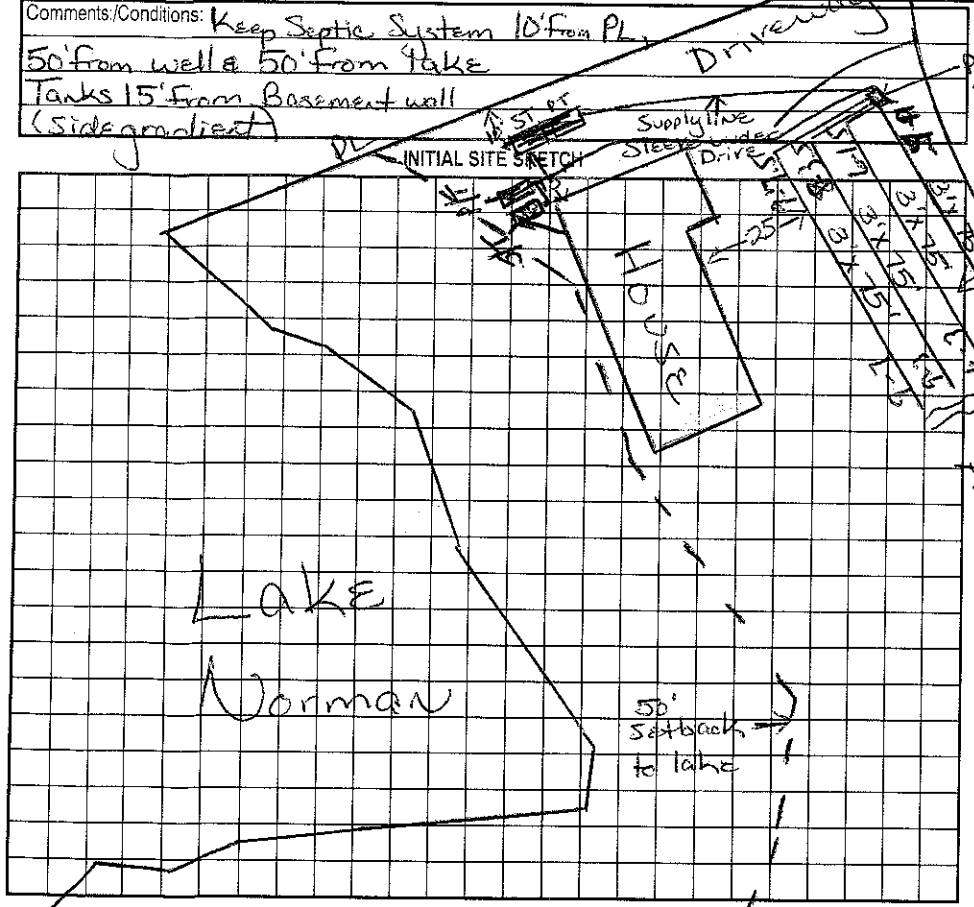
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

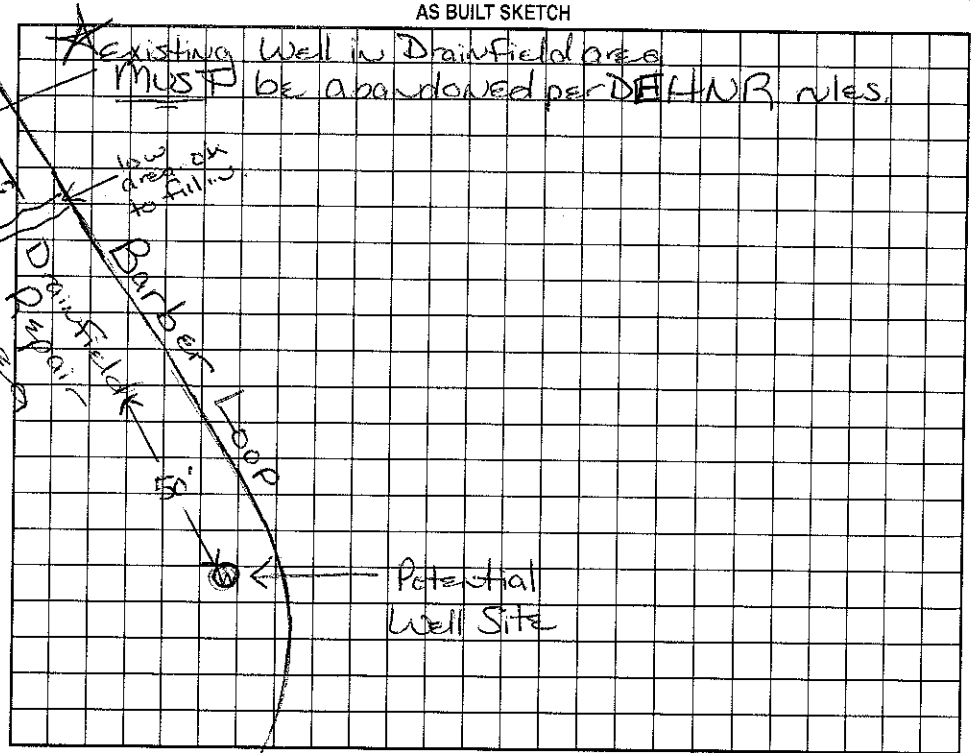
Comments/Conditions: Keep Septic System 10' from PL, 50' from well & 50' from lake. Tanks 15' from Basement wall (Side gradient)

Comments/Conditions: Keep Septic Drainfield 25' from basement wall (upgradient). *25% Reduction in Drainfield area.

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 Fitzpatrick date 10/28/99 Installed by: Tim Ammons

Improvement Permit by: Maria H.H. Dotson date 10/26/99 Operation Permit by: Wesley Sparks RS date 6/1/01

Authorization to Construct by: Maria H.H. Dotson date 10/26/99 Existing System Inspection by: _____ date _____

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