4100

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 147154 PIN # 4616-90-7610 DATE 10-7-09

OWNER or APPLICANT MID-ATLANTIC CUSTOM BUILDERS PHONE: Business 704-202-5568 Home:

OWNER or APPLICANT ADDRESS PO BOX 3792 MVILLE 28117

LOCATION / DIRECTIONS BSR, TR CHUCKWOOD, TL BARBER LP, ON L

SUBDIVISION WATER TREE LANDING BLOCK / SECTION LOT # 56 LOT AREA 30,434 SQ DESIGN FLOW 480 L.T.A.R. .3

Septic Tank 1000 Gallons: STB 1012 Date 6-22-09

Pump Tank ____ Gallons: PT ____ Date ____

Pump Make ____ Model ____ Serial # ____

Nitrification Field No Fields 1 No Lines 5 Linear Feet 400

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth —

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

System Description: GRAVITY 25% REDUCTION

Repair System Description: LP - PANEL BLOCK

Maintenance Agreement Required ☐ YES ☒ NO INITIALLY

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4 ☐ Business No. Persons ____ ☐ Other No. Employees ____ ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions 1) INSTALL PER PLAN SPECS

Comments / Conditions Installed "Quick 4" essentially as Drawn

INITIAL SITE SKETCH

SEE ATTACHED PLAN BY ROLLANS SOIL & ENVIRONMENTAL SERVICES

AS BUILT SKETCH

The proposed / existing GARAGE addition does not appear to impact the existing septic system.

**NOTE: ST MIN SP FROM GARAGE

R.S.

Date: 2-23-12

ICHD-Environmental Health Division

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 ____

Improvement Permit by: J.R.A. RS Date 10-7-09

Authorization to Construct by: J.R.A. RS. Date 10-7-09

Installed by: Gunter

Operation Permit by: RS Date: 10/13/09

Existing System Inspected by: ____ Date: ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

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