IREDELL COUNTY HEALTH DEPARTMENT

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

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

Existing

PERMIT# 12710 PIN# 4624294243

OWNER OR CONTRACTOR Simonini Builders PHONE: Business 662-3335 Home

DATE 4-28-05

ADDRESS 87 E. Morehead Ste 100 Charlotte NC 28202

LOCATION Brawley School Rd TR 2nd Mansfield TL Brockton TL Dedham 4th on rt.

SUBDIVISION The Point BLOCK / SECTION 1 LOT 162 LOT AREA 1.49 Acre SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3

Existing

Septic Tank: 1500 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Existing Gravity - 25% Red.

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

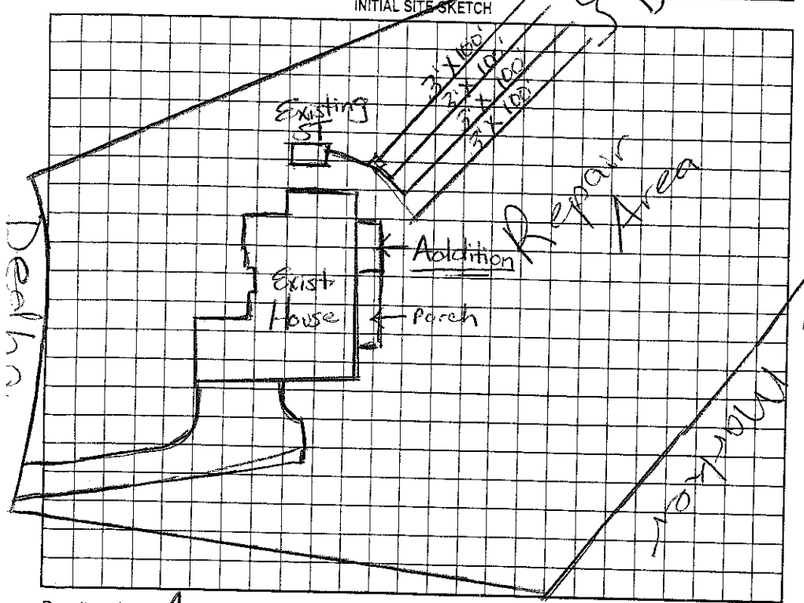
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☒ Community

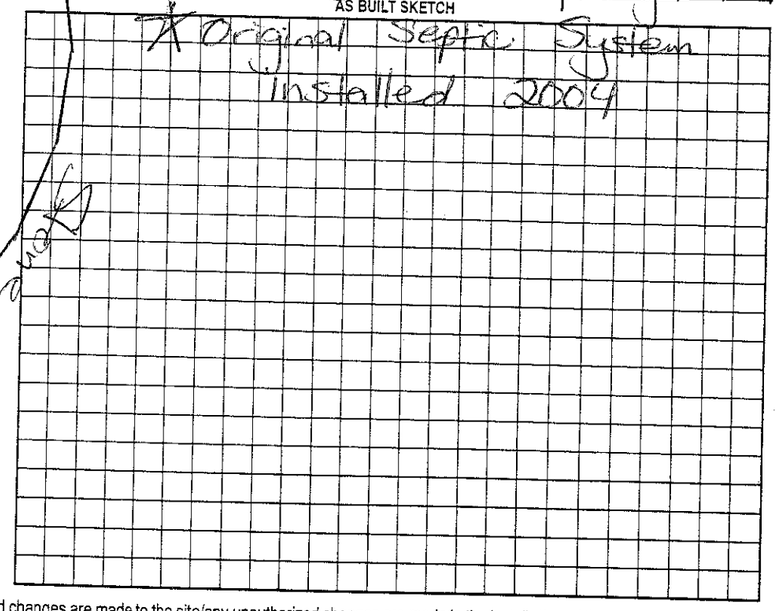
Comments:/Conditions: Existing System is okay to add addition to.

Comments:/Conditions: Note: Sitting room addition doesn't encroach on Existing Septic System, doesn't effect Septic System or Repair

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: date 4/20/05

Improvement Permit by: Maina H. Dotson RS date 4/28/05

Authorization to Construct by: date

Installed by:

Operation Permit by: date

Existing System Inspection by: Maina H. Dotson date 4/28/05

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