IREDELL COUNTY HEALTH DEPARTMENT

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

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

2'00

PERMIT# 125118 PIN# ~~4624436258.035~~ 4624-35-5949 Perrin DATE 6-13-05

OWNER OR CONTRACTOR Simonini Builders PHONE: Business 358-9940 ~~Home~~ 980 722 9629

ADDRESS 1910 South Blvd Charlotte, NC

LOCATION Brawley School Rd TL Hopkinton on right

SUBDIVISION The Point BLOCK / SECTION 10 LOT 1035 LOT AREA 30,817 SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1000+ Gallons; STB 338 Date 10-17-05
Pump Tank: 1000 Gallons; PT 283 Date 10-16-05
Pump Make Gould's Model WE03J2 Serial No.
Nitrification Field: No Fields 1 Square Feet 640 Linear Feet 320'
No Lines 3 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I, II, III, (IV), V, VI
System Description: Pump-LP-Panel Blk
Repair System Description: Same
Maintenance Agreement Required: X Yes ☐ No

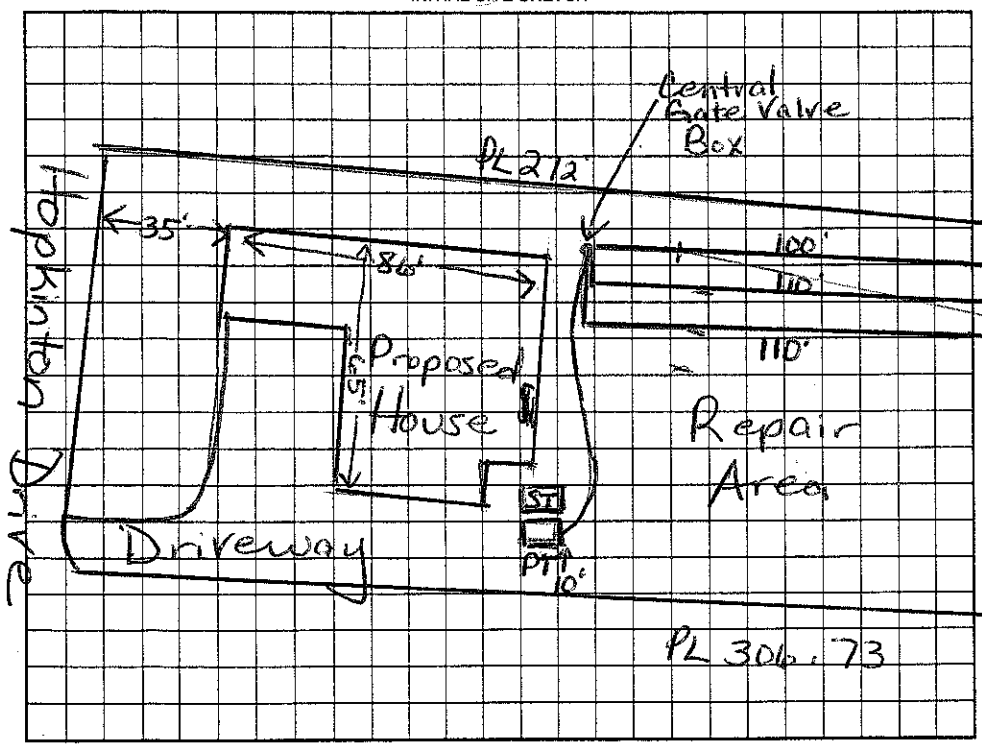
X House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public ☐ Community

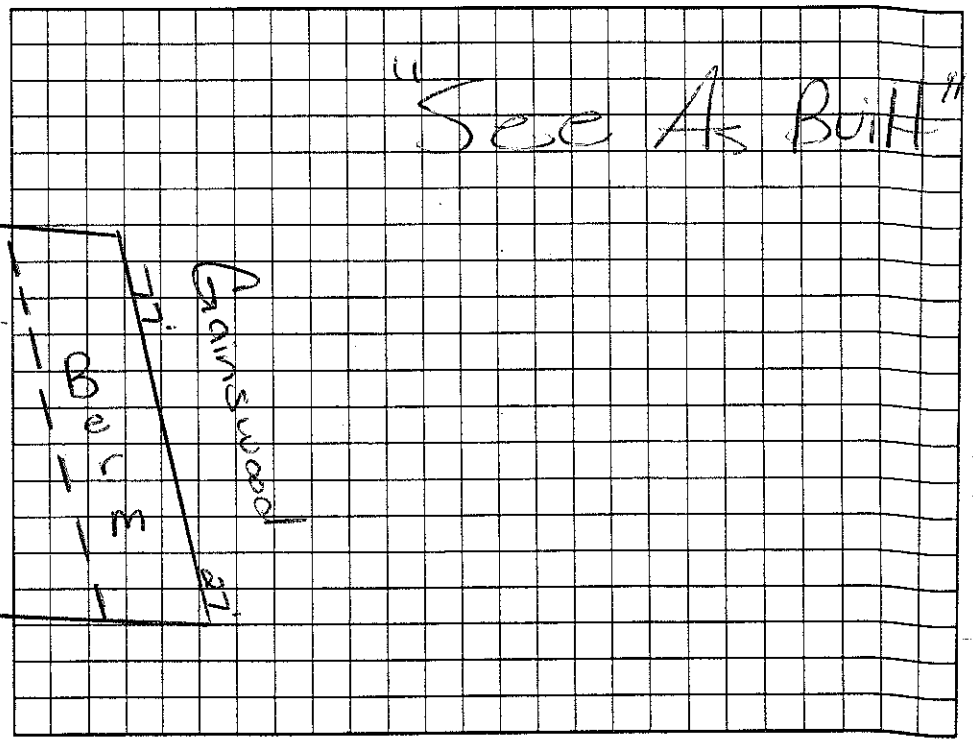
Comments:/Conditions: Scale 1:50
Keep Septic System at least 10' from PL & 10' From house

Comments:/Conditions: Permit replaces previous permit dated 4/12/05
Lines & tanks checked 12/19/05 MD

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: [signature] date 7/28/05

Improvement Permit by: Maria H. Dolan RS date 6/13/05

Authorization to Construct by: Maria H. Dolan RS date 6/13/05

Installed by: R & H date

Operation Permit by: Maria H. Dolan RS date 1/18/06

Existing System Inspection by: date

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

As Built

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125118 PIN# 4624360 2585.035 DATE 12-20-05

OWNER OR APPLICANT Simonini Builders PHONE: Business 358-9940 Home

ADDRESS

LOCATION Brawley School Rd TL Hopkinton on right

SUBDIVISION The Point BLOCK / SECTION 10 LOT 1035 LOT AREA 30,617 SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1500 Gallons; STB 338 Date 10-17-05
Pump Tank: 1000 Gallons; PT 283 Date 10-16-05
Pump Make: Goulds Model WE0312m Serial No.
Nitrification Field: No Fields 1 Square Feet 6040' Linear Feet 320'
No Lines 4@80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: Pump-LP-Panel Blk
Repair System Description: Same
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Persons No. Employees

Water Supply: ☐ Individual ☒ Public ☒ Community

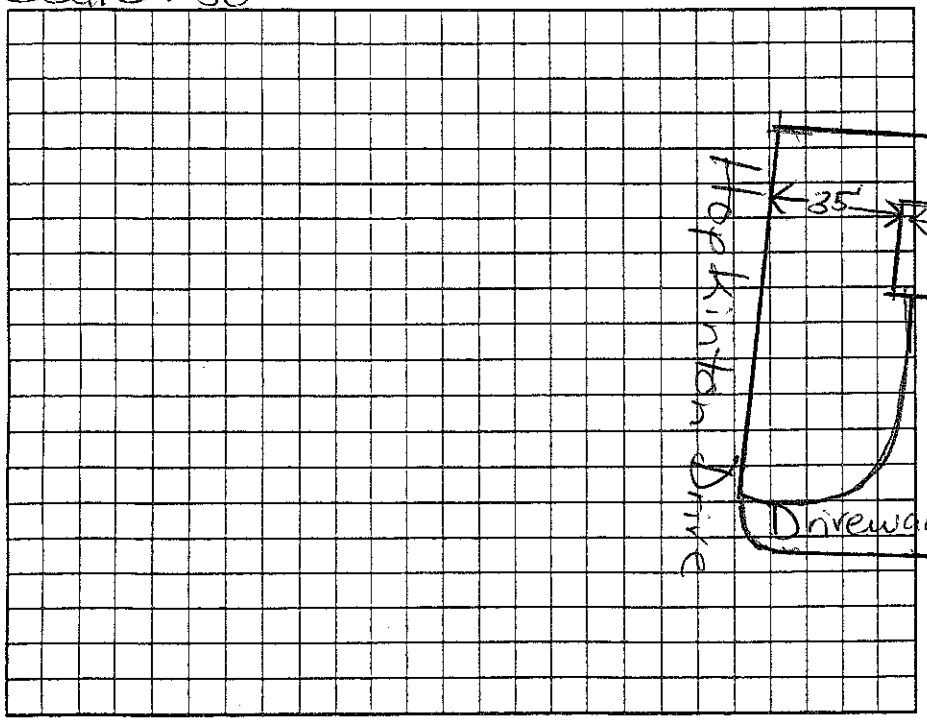
☐ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

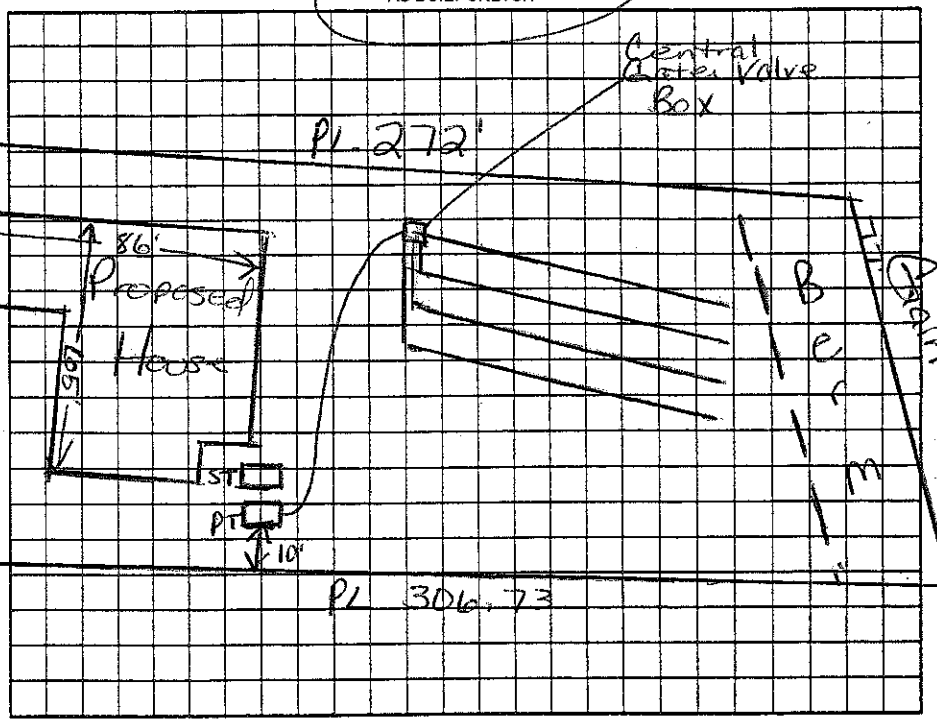
Comments:/Conditions:

Scale 1:50

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

Improvement Permit by: date

Authorization to Construct by: date

Installed by: R & D

Operation Permit by: Maria H. Dotson RS date 1/18/06

Existing System Inspection by: Maria H. Dotson RS date 1/18/06

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