Pd $710 5-15-13

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 17451 PIN # 4625877001 DATE 10-1-2012

OWNER or APPLICANT Alan Simonini Homes LLC PHONE: Business 980 722-1116 Home: 704 333 8999

OWNER or APPLICANT ADDRESS P.O. Box 1546 Cornelius, NC 28031

LOCATION / DIRECTIONS Brawley School Rd TR Marstons Mill TL White Horse TL Ballston TL Brownstone on Rt

SUBDIVISION The Point BLOCK / SECTION 4 LOT # 458 LOT AREA 1.195 DESIGN FLOW 600gpd L.T.A.R. .3 / .2

Septic Easement TR Brownstone on right offsite / onsite Repair

Septic Tank 1500 Gallons: STB 338 Date 2-16-14

Pump Tank 1500 Gallons: PT 477 Date 2-26-14

Pump Make Orenco Model Serial #

Nitrification Field No Fields 1 No Lines 4 Linear Feet 334'

Trench Width 24" min. 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 Block Offsite

Repair System Description: Pump - Panel Block

Maintenance Agreement Required ☒ YES ☐ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 5 ☐ Business No. Persons ☐ Other No. Employees ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions: Remove all terraces & berms & Smooth out those on Septic Easement

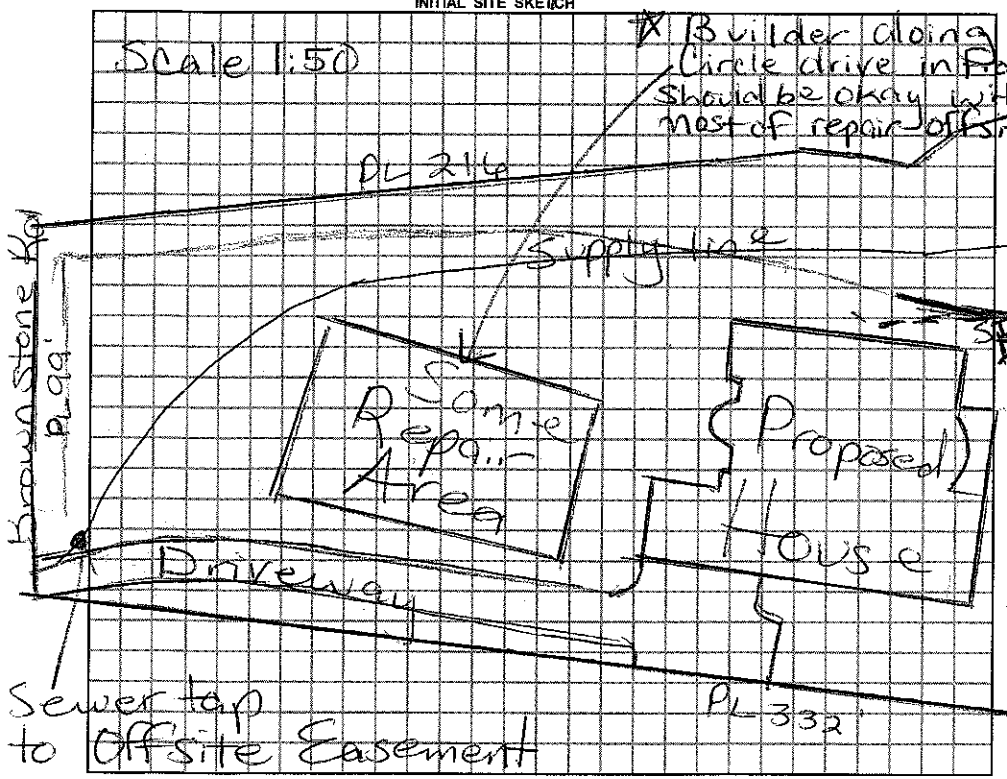
* Do Not put drive over Sewer tap to Offsite Easement. Drilled 5/32" hole

Comments / Conditions: * Must keep pool out at least 15ft From tanks

5/3/14 Checked lines, installed as drawn

11/5/14 Set pressure 2ft

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 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: [signature] Date 5/15/13

Improvement Permit by: [signature] RHS Date 10/1/12

Authorization to Construct by: [signature] Date 10/2/12

Installed by: [signature] RHS

Operation Permit by: [signature] Date: 11/5/14

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