$ 350 — 10.00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 132424 PIN# 4625956819 ~~4635-06-6773~~ DATE 11-21-05

OWNER OR APPLICANT Greg Robbins Custom Homes PHONE: Business 724-1511 Home 336 345-0648

ADDRESS PO. Box 30220 Winston-Salem, NC 27130

LOCATION Brawley School Rd TL Chatham Rd immediately on left

SUBDIVISION The Point BLOCK / SECTION 1-B LOT 57 LOT AREA 1.503 Acre SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000+ Gallons; STB 338 Date 4-30-06
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"

[X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI
System Description: Gravity-25% Reduction
Repair System Description: Pump/Gravity 25%
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other
No. Bedrooms 4 No. Persons ____ No. Employees ____

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

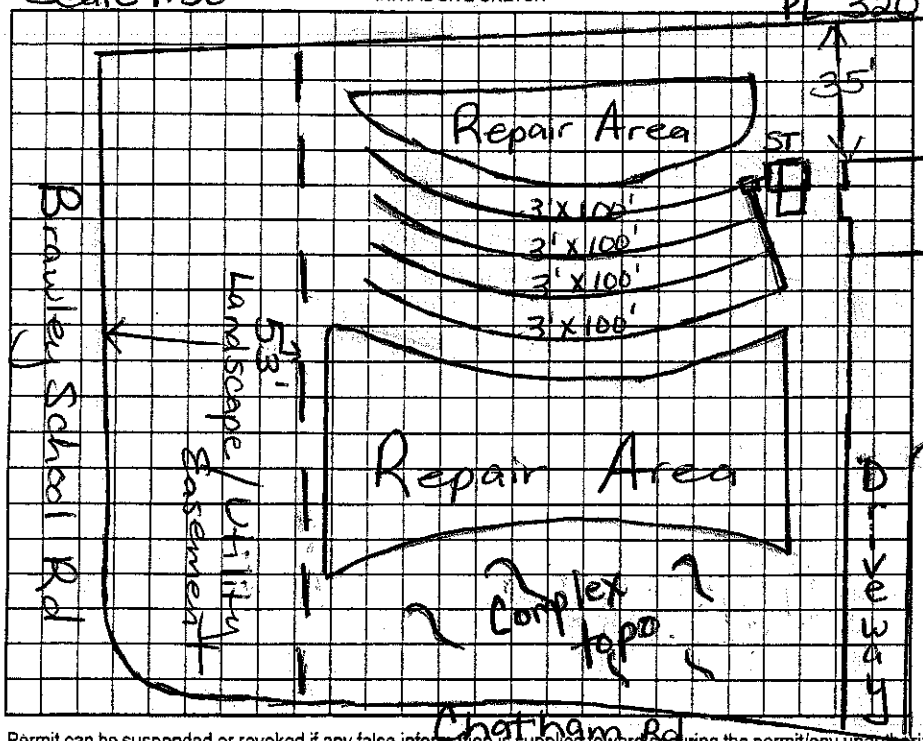
Gravel Depth N/A [X] Gravity [ ] Pressure [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Comments/Conditions: *Note: Must stub out plumbing high enough to maintain gravity flow to ST, otherwise pump will be needed.

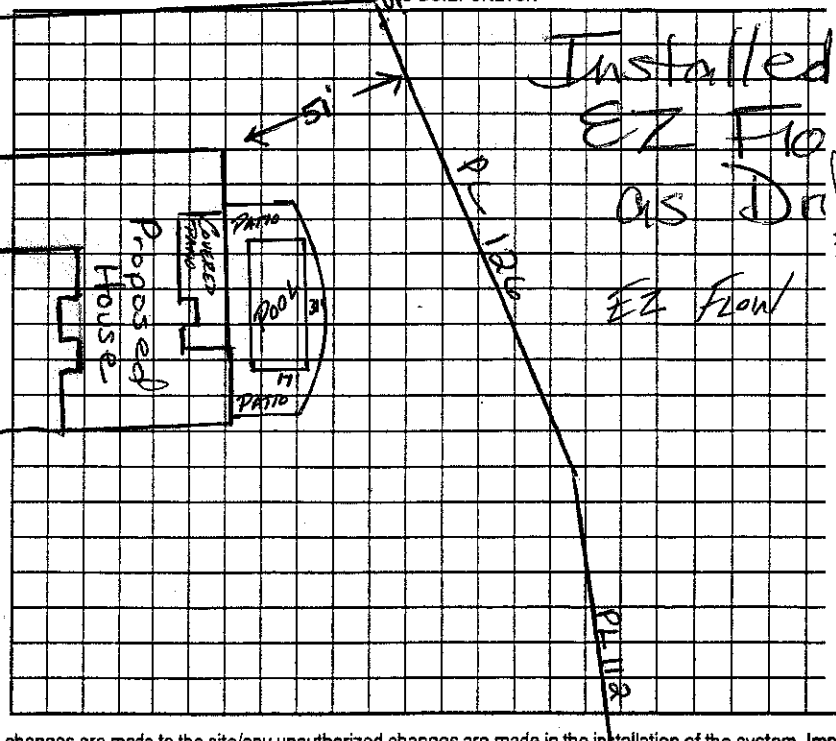
Comments/Conditions: *Keep Septic System at least 10' From house or 15 ft from cut, 25ft or greater. Should have utilities marked, prior installation of drainfield.

Scale 1:50

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed 17' x 31' addition does not appear to impact the existing on-site septic system or well.** NOTE

REHS Date: 12/30/14

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 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 11/22/05 Installed by: Hallman Constructions

Improvement Permit by: Maria H. Dolan RS date 11/21/05 Operation Permit by: Maria H. Dolan RS date 6/6/06

Authorization to Construct by: Maria H. Dolan RS date 11/21/05 Existing System Inspection by: ____ date ____

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