10:00 202263

# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # ~~13283~~

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

PIN # 4626082739

APPLICANT: ES JOHNSON APPLICANT ADDRESS: PO BOX 1402 CORNELIUS NC 28031

SITE ADDRESS: 129 W COLD HOLLOW FARMS PHONE: ALT. PHONE: 987 7950

SITE DIRECTIONS: BRAWLEY SCHOOL - TR MCKENDREE - TR BAREFOOT - TL W COLD HOLLOW ON LT AT END

SUBDIVISION: FARMS SECTION: 4 LOT # 478 LOT AREA: 35347 ft² DESIGN FLOW: 600 L.T.A.R.: .25

Septic Tank 1500 (gal) STB 338 Date 6-2-14
Pump Tank 1500 (gal) PT 417 Date 6-10-14
Pump Make Myers Model ME50521 Serial #
# Nitrification Fields 1 # Lines 6 Linear Ft: 400
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

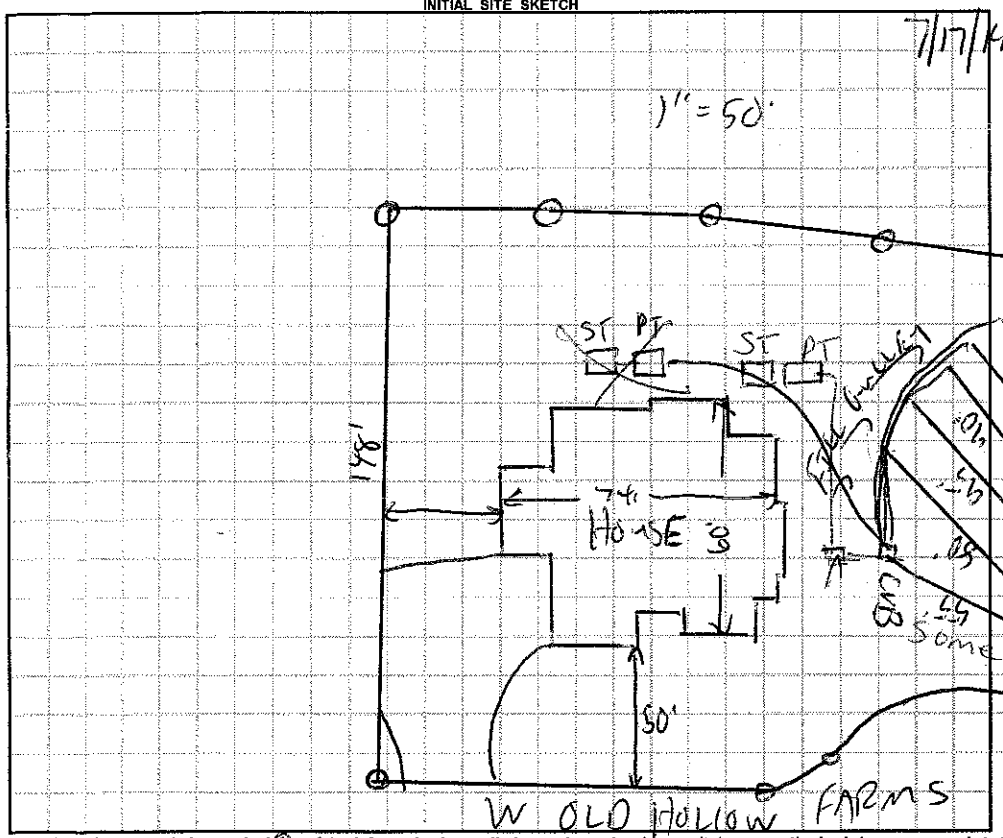
☑ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI
System Description: LPPDPS
Repair System Description: OFFSITE LPPDPS
Maintenance Agreement Required: ☐ YES ☐ NO ☐ GRAVITY ☑ PRESSURE

☑ Residence No. Bedrooms 5
☐ Business No. Persons 10
☐ Other No. Employees
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

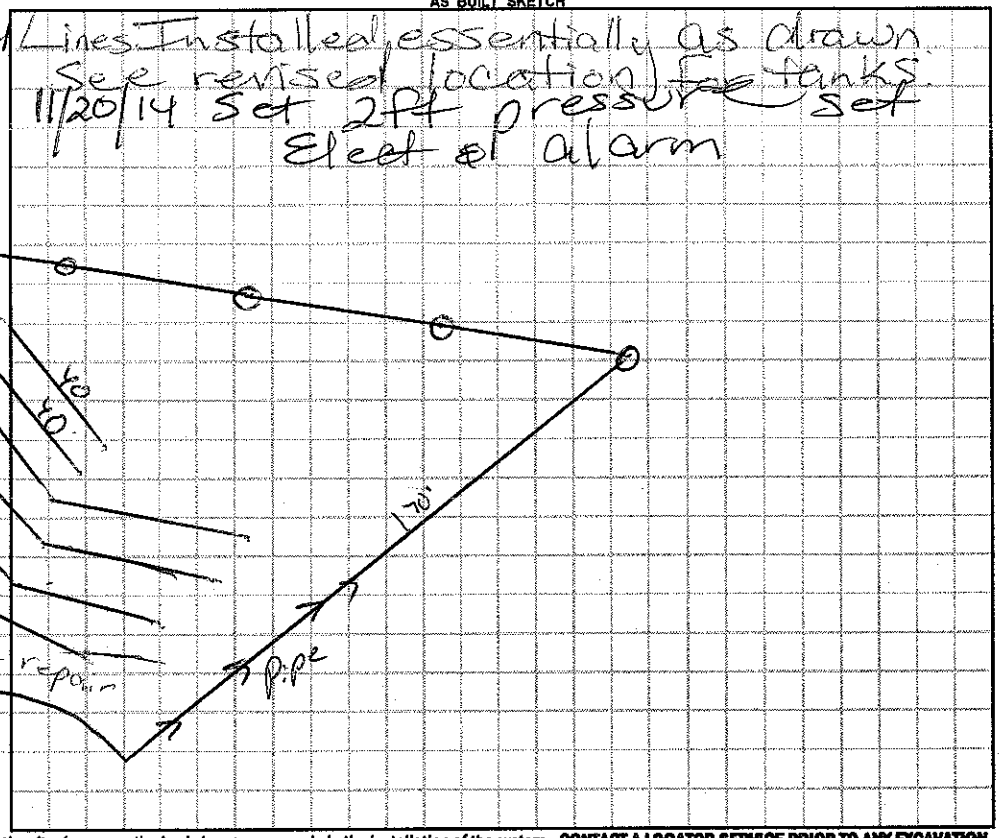
Water Supply: ☐ Private ☐ Public ☑ Community

Comments / Conditions: Drilled 5/32" holes, installed 36" trenches, Filters Installed.

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.* **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☐ **IMPROVEMENT PERMIT** *with 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: 01-28-14 Installed by: Willie Christenberry

IMPROVEMENT PERMIT by: Date: 1/28/14 OPERATION PERMIT by: RS Date: 11/20/14

AUTHORIZATION TO CONSTRUCT by: Date: 1/28/14 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK