IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 086015 PIN# 4626333713 DATE 11/16/99

OWNER OR CONTRACTOR Tom Arkle PHONE: Business Willis Spivey 483-0690 Home 597-5555

ADDRESS 5310 Micabell Rd. Charlotte, NC 28226

LOCATION Brawley School Rd TR Chuckwood TR Indian Trail TL Aquarius Ln at end — 115 Aquarius Ln

SUBDIVISION Cla T BLOCK / SECTION 7 LOT 26 LOT AREA 1.0 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. Existing

Septic Tank: Existing Gallons; STB ____ Date ____

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields ____ Square Feet Existing Linear Feet ____

No Lines Bed 7½ x 60' Trench Width 7½' Max Trench Bottom Depth ____ Gravel Depth 12"

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

System Description: Existing Gravity – Conventional

Repair System Description: Modified

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

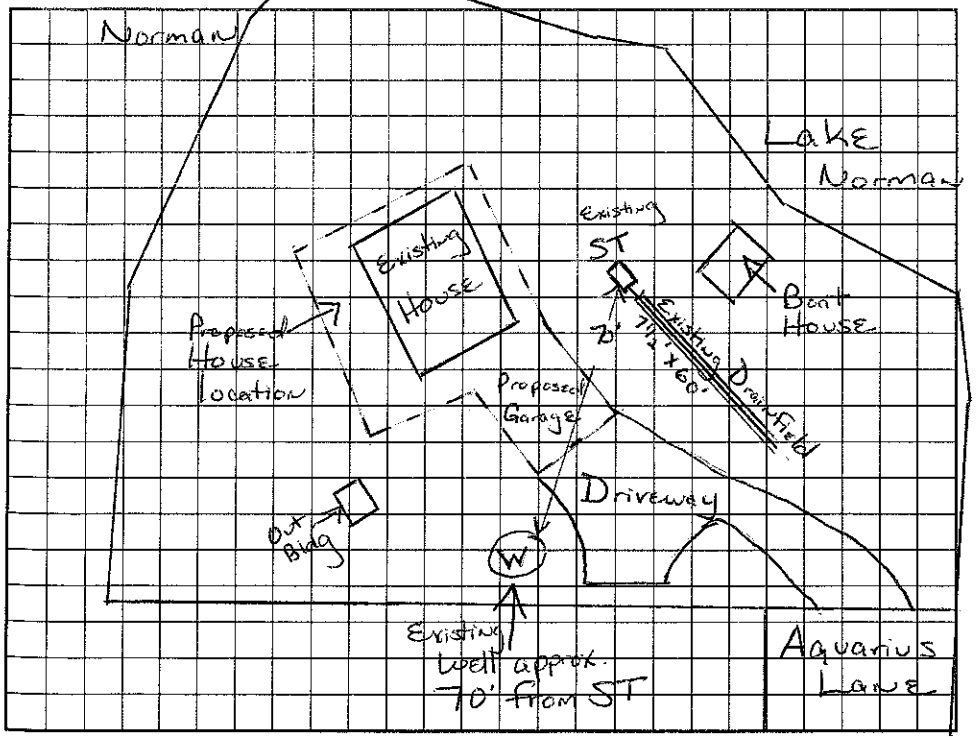
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Existing Drainfield appears to be functioning okay at time of inspection, No failures noticed. Keep House at least 5' from Septic System.

Comments/Conditions: Note: Should repair be needed in future, Sewage could be pumped to existing well location & existing well could be abandoned & relocated. Replacing 3 Bedroom house with 3 Bedroom House (Septic System originally installed 6/13/72)

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: X [signature] date 12-23-99 Installed by: ____

Improvement Permit by: ____ date ____ Operation Permit by: ____ date ____

Authorization to Construct by: Maria Hall Dotson RS date 11/16/99 Existing System Inspection by: Maria Hall Dotson RS date 11/16/99

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