IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

__Y__ Property Line measurements are clearly identified... __X__ All proposed structures are indicated...

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

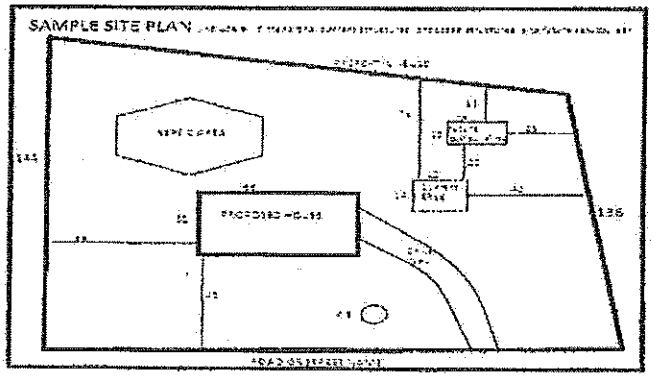
__X__ Front and side setbacks from property line... ____ Preferred driveway location and configuration, preferred well location...

____ Area you prefer your septic system to be placed... ____ North arrow, or other sufficient indicator of direction...

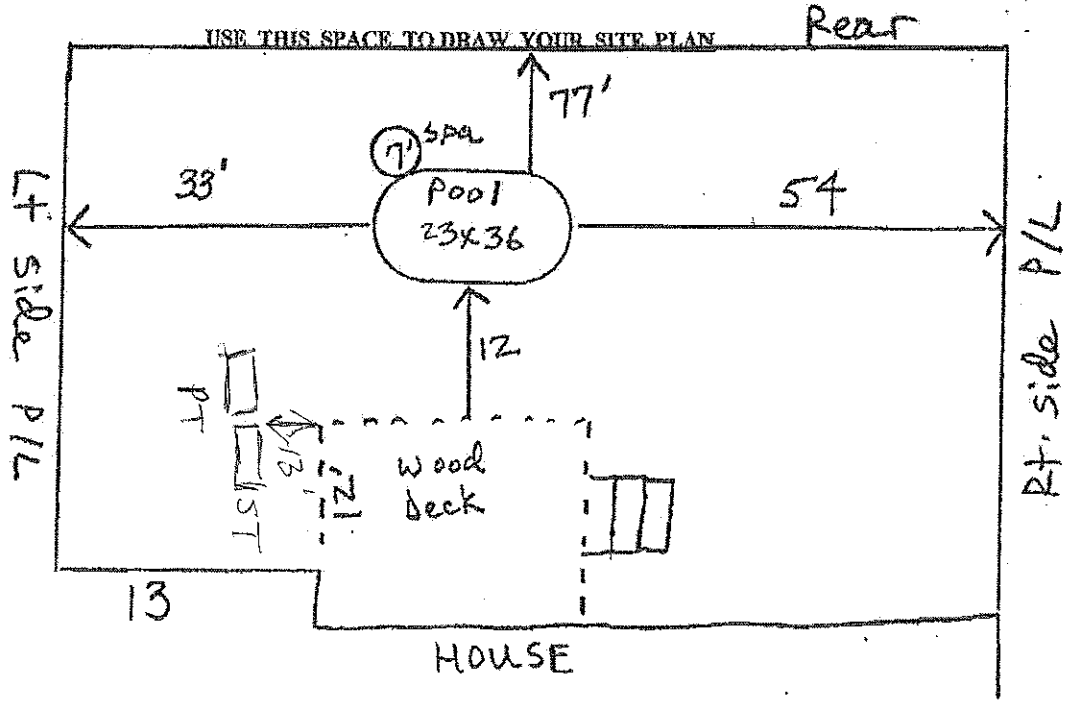
Circle N/A on the following if appropriate:

____ Location of septic systems and wells within 100' of your property... N/A

____ Location of easements and rights of ways on your property... N/A ____ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN



Signature: Melinda Bruce - Aloha Pools Inc 5-18-2015

REQUIRED property owner or owner's legal representative signature. DATE

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 119502 PIN# 4625-50-5404.384 4626-37-7283 DATE 2/21/05

OWNER OR CONTRACTOR JS TESTA PHONE: Business 704-892-2995 Home

ADDRESS

LOCATION Bayberry Circle, 1100 TR McKendree TL Kemp TR Alden Spring TL Bayberry on (L)

SUBDIVISION Farms BLOCK / SECTION 3 LOT 384 LOT AREA .78AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: ~~1500~~ Gallons: STB 338 Date 10/1/05

Pump Tank: 1000 Gallons: PT 333 Date 9/21/05

Pump Make: E DULAS Model WEB-3,12,14 Serial No. 10105

Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270

No Lines 3@90' Trench Width 2-3' Max Trench Bottom Depth 3' Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, III, (IV), V, VI

System Description: Pressured - 16" PPBPS

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

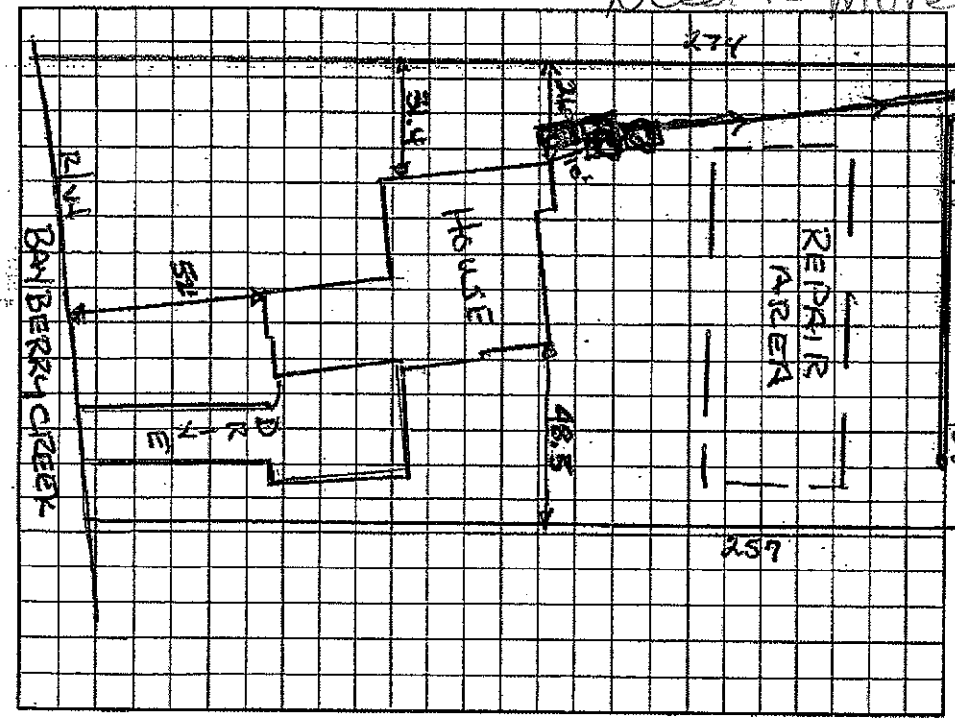
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

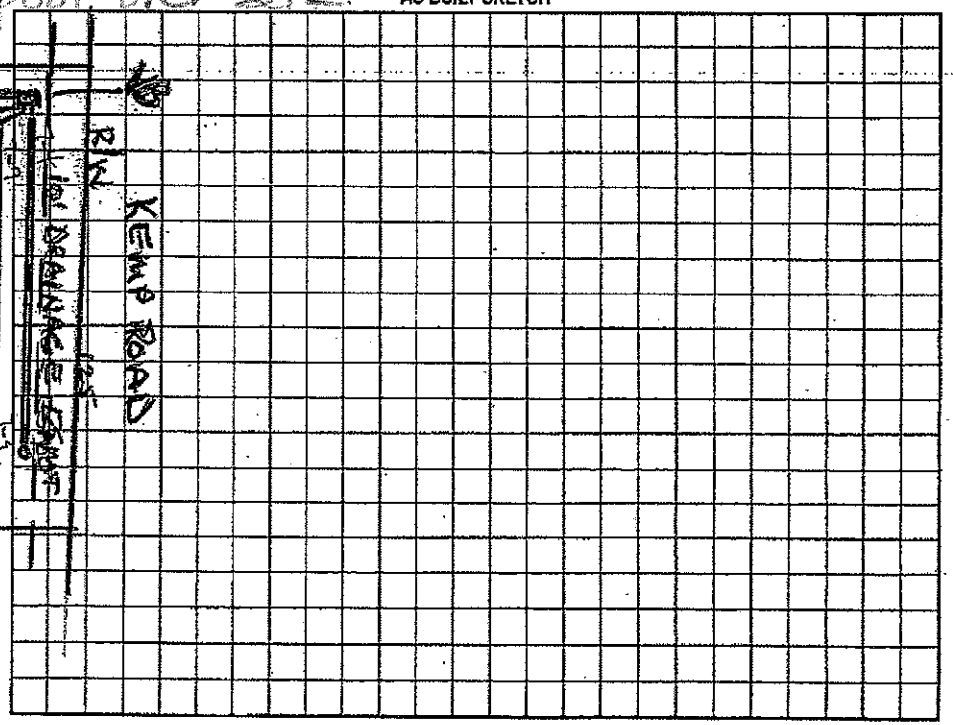
Comments:/Conditions: Pool 20ft from repair area Edge of PT 13ft from edge of House & 20ft down J

Comments:/Conditions: Lining Tanks

INITIAL SITE SKETCH Need to move pool over 2ft.



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

Improvement Permit by: Wesley Sparks RS. date 2/21/05

Authorization to Construct by: Wesley Sparks RS. date 2/21/05

Installed by: Osborn & Sons

Operation Permit by: Wesley Sparks RS. date 11/4/05

Existing System Inspection by: date

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