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:

_X_ 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

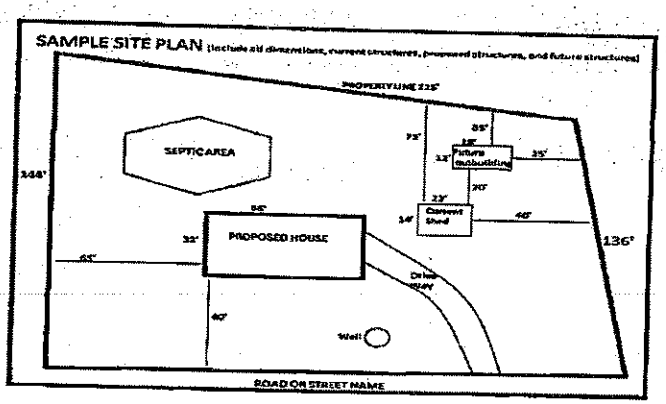
_____ Front and side setbacks from property line... **_____ Preferred driveway location and configuration, preferred well location...**

_____ 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

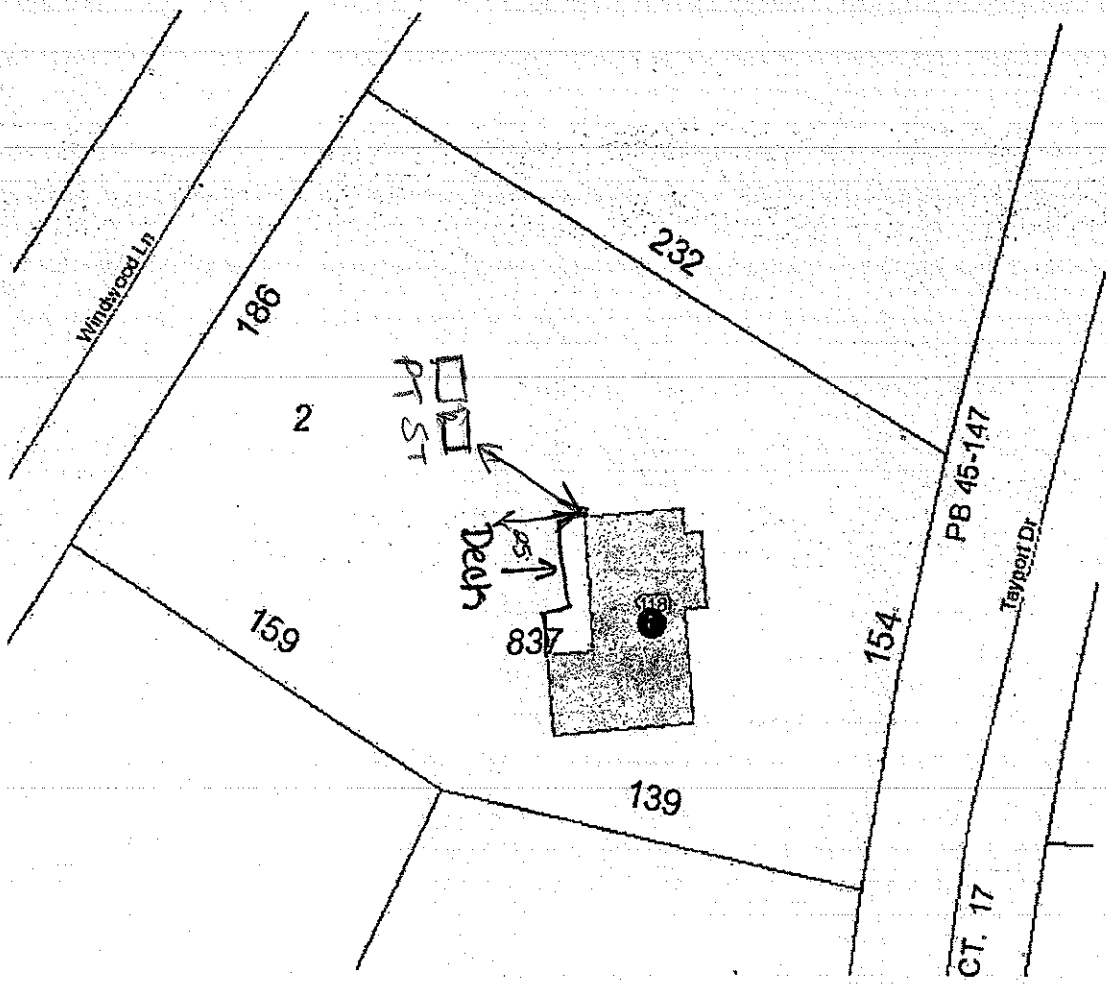
See attached.

Signature: Heather Broadaway

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

9/14/16

DATE


Windbrook Ln
186
232
2
PB 45-147
Taypert Dr
154
159
139
CT. 17
118
837

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 120026 PIN# 4629-63-5580 5195 DATE 12-10-04

OWNER OR CONTRACTOR NEW HORIZON BUILDERS (MATTIE HELMS) Phone: Business 704-634-2600 Home 704-528-3214

ADDRESS 176 FERN HILL RD TROUTMAN, NC 28166

LOCATION STATE PARK ROAD ① MEDIAN ② APPX. ③ TAYPORT 2ND ON RT

SUBDIVISION CLAY BLOCK / SECTION 6 LOT 83 7B LOT AREA 1.08AC SITE CLASS. 2S DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 375 Date 12-31-04

Pump Tank: 1000 Gallons: PT 375 Date 2-4-05

Pump Make: CENTER LINE Model: 98-FF Serial No.

Nitrification Field: No Fields 1 Square Feet EG=1820' Linear Feet 360'

No Lines 3x100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I, II, ☒ IV, V, VI

System Description: PUMP 2500 PERMIT

Repair System Description: LD 5000 PERMIT

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth N/A ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement w/o plumbing

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: ① KEEP HOUSE OUT OF GROUND & BACKFILL FOR POSITIVE DRAINAGE AWAY ② 25' BASEMENT DRAIN SETBACKS OVERDOES 15' POS DRIVE SETBACK ③ INSTALL LINES ON CONTOUS AMENDMENTS

Comments/Conditions: ④ KEEP WELL 100' FROM SEPTIC FIELD SYSTEM. ⑤ THIS PERMIT IS A LIMITED REPAIR, PREVIOUS PERMIT ISSUED ON 5-17-04 BY M. POTEAT, ⑥ NEIGHBORING LOTS PERMIT IS EXPIRED, SEE ATTACHED SETBACKS COMMENTS

1" = 60'

INITIAL SITE SKETCH

AS BUILT SKETCH

I = INITIAL
R = REPAIR

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 03-17-05 Installed by: ABERNATHY

Improvement Permit by: _____ date 12-13-04 Operation Permit by: _____ date 7/27/2005

Authorization to Construct by: _____ date 12-13-04 Existing System Inspection by: _____ date _____

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