IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 71622 PIN# ~~4625-44-1684~~ 4635-14-3667 DATE 11/15/99

OWNER OR CONTRACTOR (DENST CUSTOM HOMES) CHARLOTTE PHONE: Business _____ Home _____

ADDRESS PO Box 1003 CHARLOTTE 117 Old Post

LOCATION BRAWLEY SCHOOL - TL PENNE DR. - QUEEN ANNE - TO EASTON DR. - OLD POST RD - ON LT

SUBDIVISION POINTE BLOCK / SECTION 1A LOT 112 LOT AREA 37944# SITE CLASS. PS DESIGN FLOW 450 gal L.T.A.R. @ 3 gal/sq ft

Septic Tank: 1000/500 Gallons; STB 4-5-00 Date 338
Pump Tank: 1000 Gallons; PT 4-5-00 Date 27
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 3@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth n/a

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: PUMP PANEL
Repair System Description: SAME
Maintenance Agreement Required: ☑ Yes ☐ No

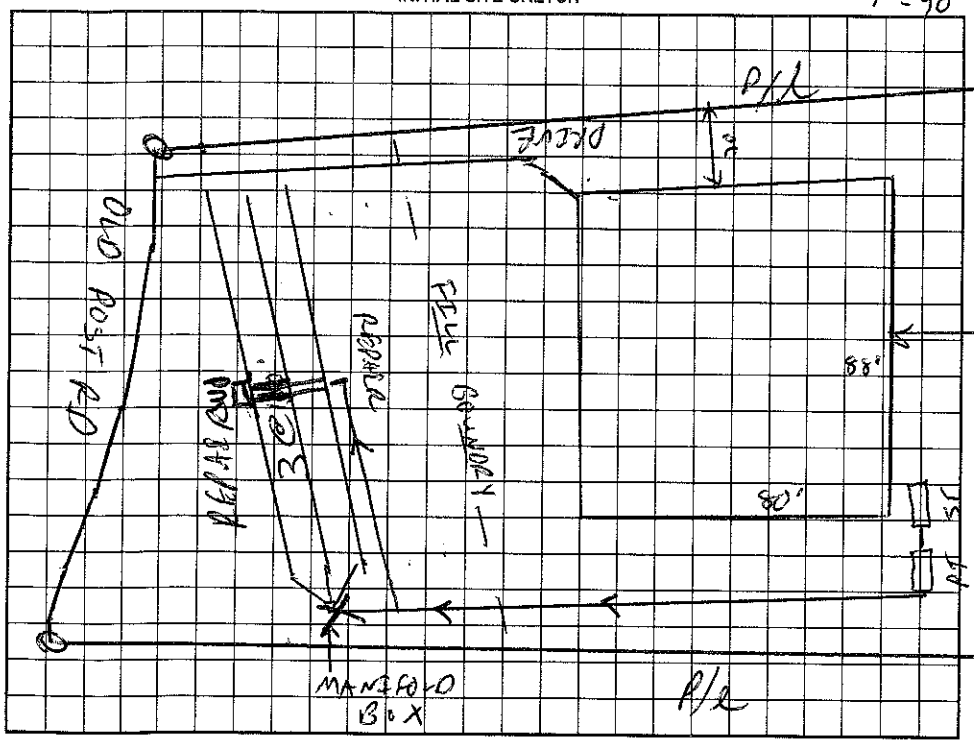
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☐ Public
☑ Community

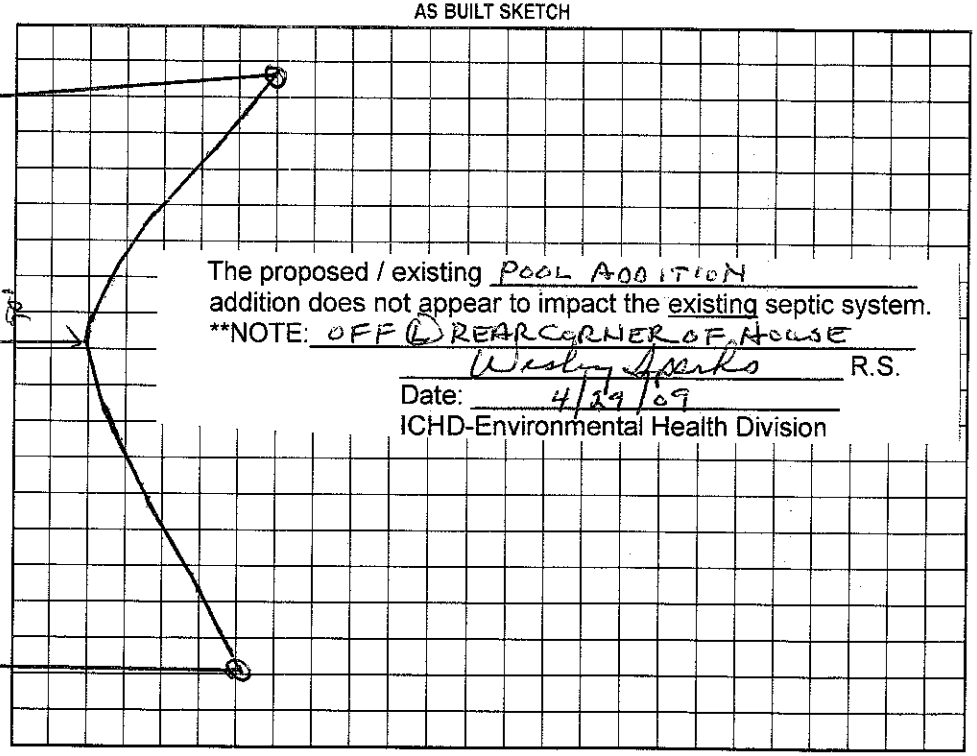
Comments:/Conditions:

Comments:/Conditions: Recent to LINES Checked 4/20/2000
Check Filter

INITIAL SITE SKETCH 1"=50'



AS BUILT SKETCH



The proposed / existing POOL ADDITION addition does not appear to impact the existing septic system.
**NOTE: OFF @ REAR CORNER OF HOUSE
Wesley Sparks R.S.
Date: 4/29/09
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 11-18-99 Installed by: R+H Plmg.

Improvement Permit by: C. Bradley Tenn RS date 11/15/99 Operation Permit by: Wesley Sparks R.S. date 6/19/00

Authorization to Construct by: C. Bradley Tenn RS date 11/15/99 Existing System Inspection by: _____ date _____

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