3:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 087599 PIN# 4635381916 DATE 2-11-2000

OWNER OR CONTRACTOR Anna Marie Gunter PHONE: Business 906-4799 Home 933-5515

ADDRESS 1532 Heather Glen Rd Kannapolis, NC 28081

LOCATION Brawley School TL Isle of Pines just past North Shore on left

SUBDIVISION Pineview BLOCK / SECTION ____ LOT 10 LOT AREA 1.0 Acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1612 Date 7-16-2000

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 535 Linear Feet 1605

No Lines 5 at 107' ea Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity - Conventional

Repair System Description: Modified / Innovative

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 3 No. Employees ____

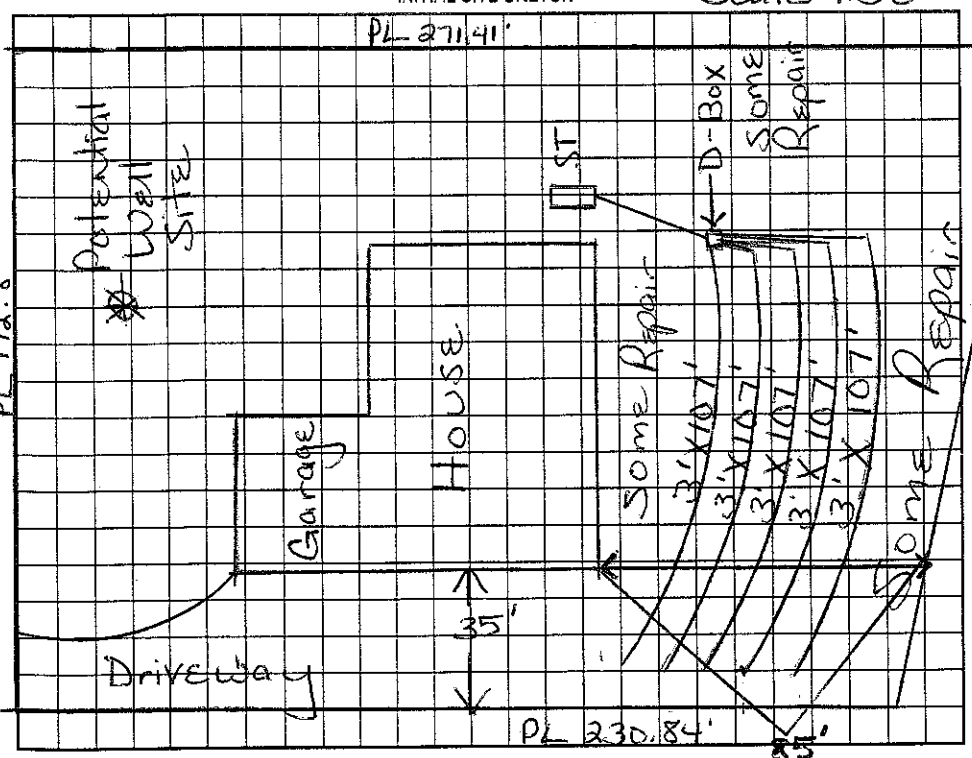
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

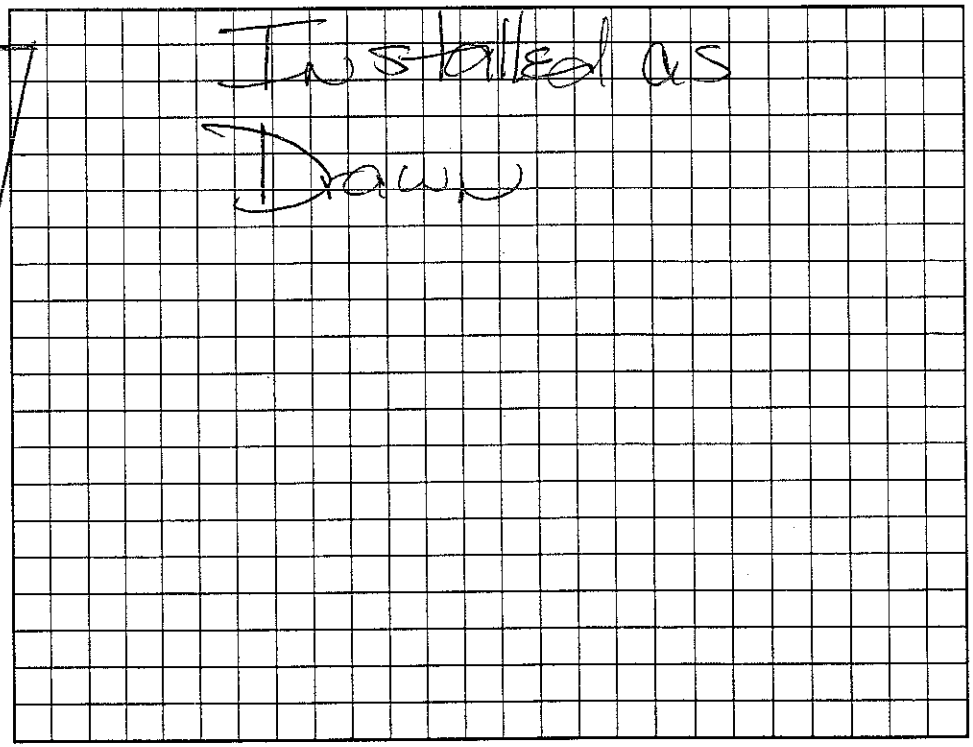
Comments:/Conditions: Keep Septic System at least 10' from PL 5' From House & 100' From well. Allow 85' behind house & back PL.

Comments:/Conditions: Keep well at least 25' From any building foundation & 100' From Septic. Filter installed Nice, neat installation.

INITIAL SITE SKETCH Scale 1:50



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: Annamarie Gunter date 2/11/00 Installed by: Piedmont Backhoe

Improvement Permit by: Marian H. Dotson RS date 2/11/2000 Operation Permit by: Marian H. Dotson RS date 9/8/2000

Authorization to Construct by: Marian H. Dotson RS date 2/11/2000 Existing System Inspection by: ____ date ____

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