IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# DOT Expansion/Repair PIN# 4636052299 DATE 12-4-06

OWNER OR APPLICANT Dina Hinson PHONE: Business 704-664-6282 Home 704-660-6867

ADDRESS 1348 Brawley School Rd Lot 1

LOCATION 1348 Brawley School Rd on right at corner of Pine Meadow Ln

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: Existing Gallons: STB _____ Date _____

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make. _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 75

No Lines 1 Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: 25% reduction

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Persons _____ No. Employees _____

Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth N/A ☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: Before AC; Easement Recorded for Repair; Pool filled; Neighbor's septic abandoned

For Installation: Cut 3 lines at edge of construction easement & place compacted soil or concrete at cut ends

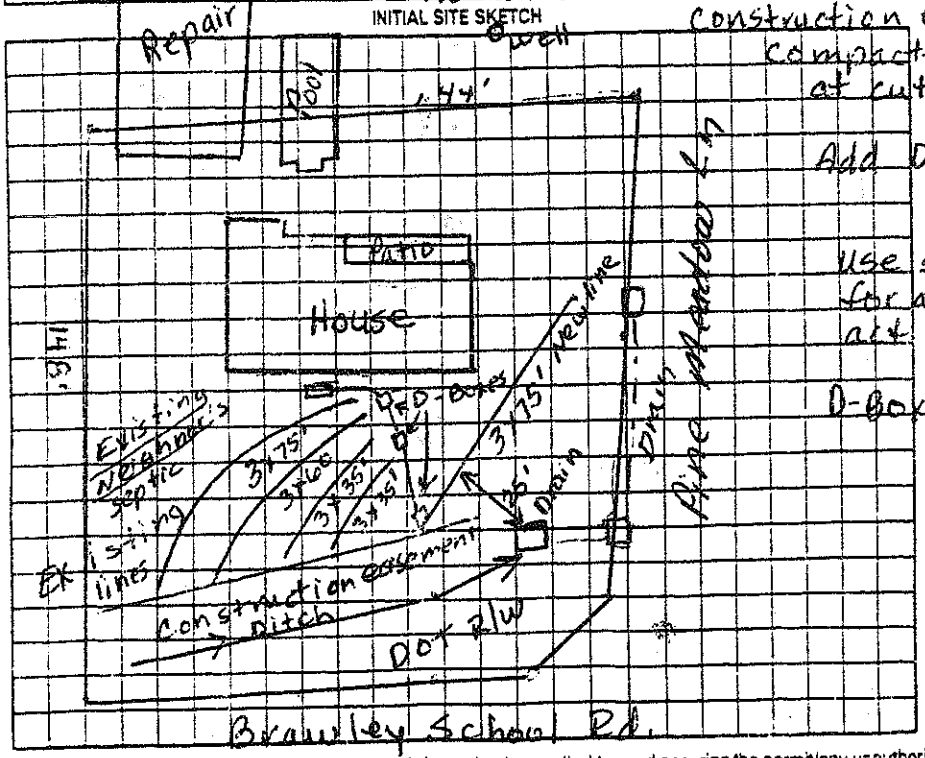
Add D-Box for new 75' 25% reduction line

Use speed levelers for all lines to act as drop boxes

D-Boxes w/ speed levelers

Comments/Conditions: Portion of Initial System and Repair Area moved to accommodate DOT R/W road expansion

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 for sixty months ☐ 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 9-4-07 Installed by: _____ date _____

Improvement Permit by: Judy Melville date 12-4-06 Operation Permit by: _____ date _____

Authorization to Construct by: Judy Melville date 9-4-07 Existing System Inspection by: _____ date _____

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