IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # ~~1350~~ 180792

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

PIN # 4636132228.000

APPLICANT: Orleans Homes APPLICANT ADDRESS: 700 Forest Pt Cir Ste 102 Charlotte NC 28273

SITE ADDRESS: 348 Cove Creek Loop PHONE: ALT. PHONE: 704 326 6736

SITE DIRECTIONS: Brawley School Rd TL Isle of Pines TR Cove Creek on left

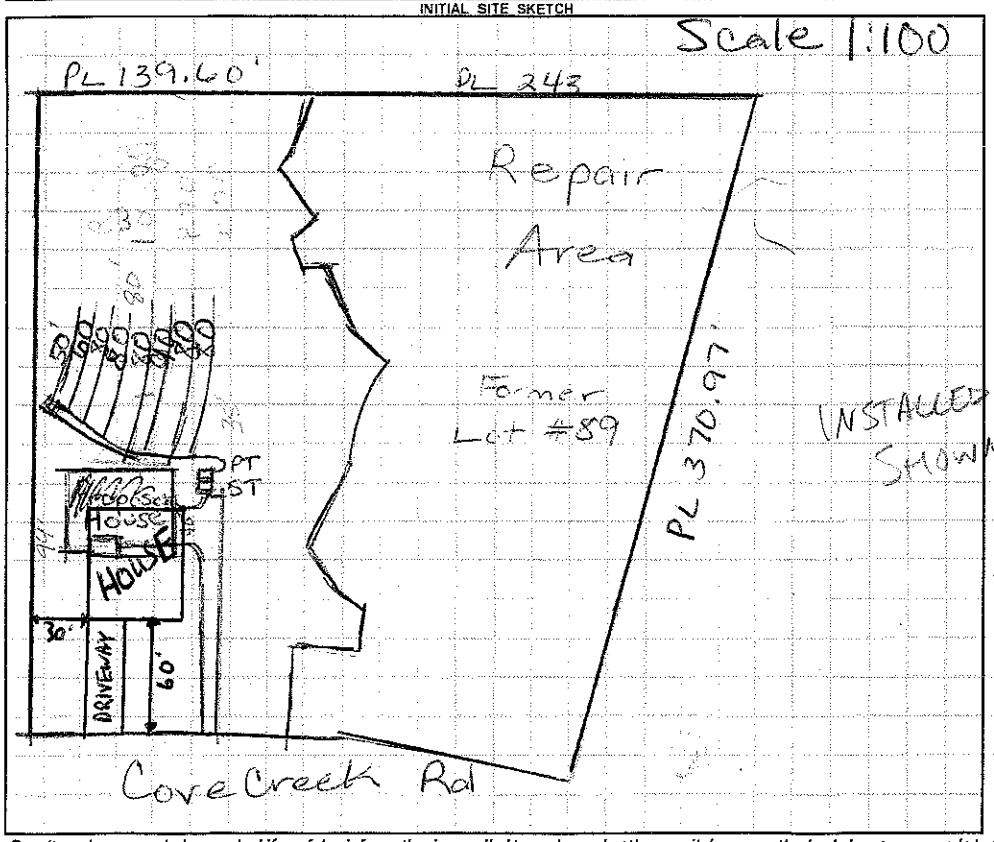
SUBDIVISION: Chesapeake Pt SECTION: 2 LOT # 89/90 LOT AREA: DESIGN FLOW: 480gpd L.T.A.R.: .2gpd

Septic Tank	1600 (gal)	STB	794	Date	10-29-13	☒ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms	4	Water Supply
Pump Tank	1000 (gal)	PT	27	Date	7-19-14	System Description:	Pump PM, 25% Reduction	☐ Business	No. Persons		☐ Private
Pump Make	Hydromatic	Model	45	Serial #		Repair System Description	Pump PM 25% Reduction	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	8	Linear Ft:	600'	Maintenance Agreement Required:	☐ S ☒ NO (Cross Creek)	☐ Slab	☒ Crawl Space		☒ Community
Trench Width	36"	Max. Trench Bottom Depth	24"	Gravel Depth	N/A	☐ GRAVITY	☒ PRESSURE	☐ Basement w/plumbing			☐ Basement w/o plumbing

Comments / Conditions: Original/Initial DrainField PM
Distribution (Type 38, @ .2 LTAR
Repair is on Former Lot #89 @ .3 LTAR

8 lines varying lengths (50, 60, 80, 80, 80, 90, 80, 80)

INITIAL SITE SKETCH



AS BUILT SKETCH

Hook Together PM TAP SIZES

APPROVED FEB 21 2014 BA

(50'+60') 110' / 90' > 1/2" Sch 40

5@80' > 1/2" Sch 80

CHECKED LINES, TANKS, SET PM

BA APPROVED MAY 23 2014

INSTALLED AS SHOWN

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration* ☐ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 8/7/13 Installed by: Willie & Tracy RS

IMPROVEMENT PERMIT by: Date: 8/5/13 OPERATION PERMIT by: Date: 6/10/14

AUTHORIZATION TO CONSTRUCT by: Date: 2-12-14 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK