IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 075396 PIN# 4636 307807 4636 42 5925 DATE 6/13/2001

OWNER OR CONTRACTOR Robert P. Hogan PHONE: Business 201-1922 Home 892-7713

ADDRESS 5609 Lancelot DR Charlotte NC 28270

LOCATION Brawley School Rd TL Stotts TR Poinsettia TR Oasis immediately on left.

SUBDIVISION Stotts Cove BLOCK / SECTION 2 LOT 29/29A LOT AREA _____ SITE CLASS. _____ DESIGN FLOW 480 gpd L.T.A.R. _____

Septic Tank: 1000 Gallons; STB 794 Date 2-7-00
Pump Tank: 1000 Gallons; PT 27 Date 8-24-0
Pump Make Myers Model ME40 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4 at 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: Comp - 25% Reduction
Repair System Description: Off site Pump Panel Lot 29A
Maintenance Agreement Required: ☐ Yes ☒ No

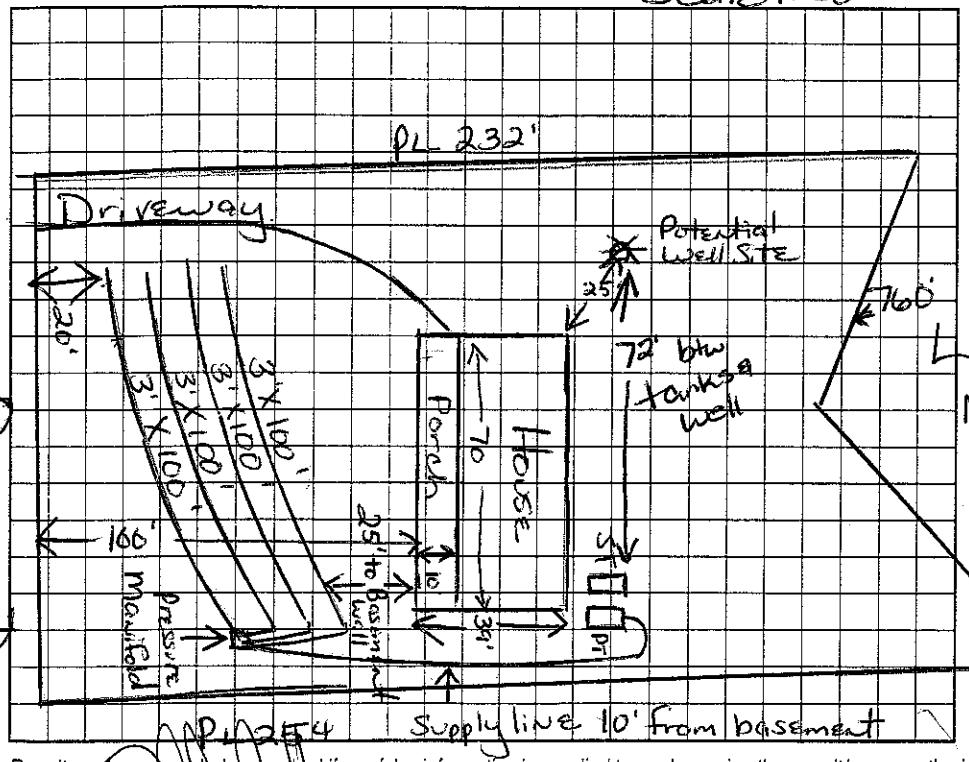
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Bathrooms 2.5 No. Employees _____
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Keep Septic System at least 10' from PL, 50-100' from any well & 25' (upgradient) of basement. Keep at least 50' from 760 contour of Lake.

Comments:/Conditions: Note: Site graded from original topography & feathered out steps in front.
Grey filter installed & riser

INITIAL SITE SKETCH Scale 1:50'



AS BUILT SKETCH

Installed EZ Flow drainfield

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: X _____ date _____ Installed by: Larry Tuckey RS

Improvement Permit by: Maria H. H. Dotson R.S. date 6/19/2001 Operation Permit by: Maria H. H. Dotson date 1/3/2002

Authorization to Construct by: Maria H. H. Dotson RS date 6/14/2001 Existing System Inspection by: _____ date _____

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