IREDELL COUNTY HEALTH DEPARTMENT

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

10:30

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

PERMIT# 0913-76 (91152) PIN# 4637345430 Charles Realty (828)320-0744 DATE 10/30/2000

OWNER OR CONTRACTOR David Heiligenthaler PHONE: Business 895-8370 Home 664-8876

ADDRESS P.O. Box 2533 Cornelius, NC 28031

LOCATION Hwy 150 W. TR Whippoorwill TL Little Acorn 2nd driveway — 113 Little Acorn

SUBDIVISION Cove I BLOCK / SECTION 10 LOT 27 LOT AREA SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. Study

Septic Tank: Existing Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 6 Square Feet Linear Feet

No Lines Trench Width 4' X 15' Max Trench Bottom Depth Gravel Depth

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

System Description: Existing Gravity-Conventional

Repair System Description: W/ Bull Run Valve

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3+

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

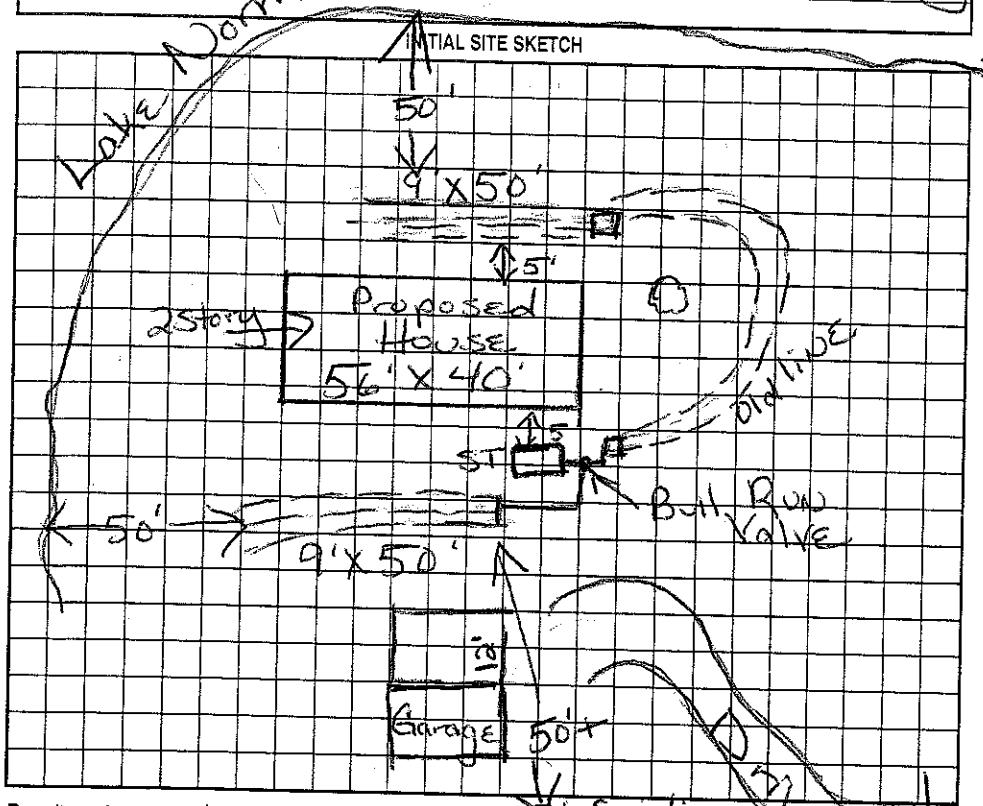
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

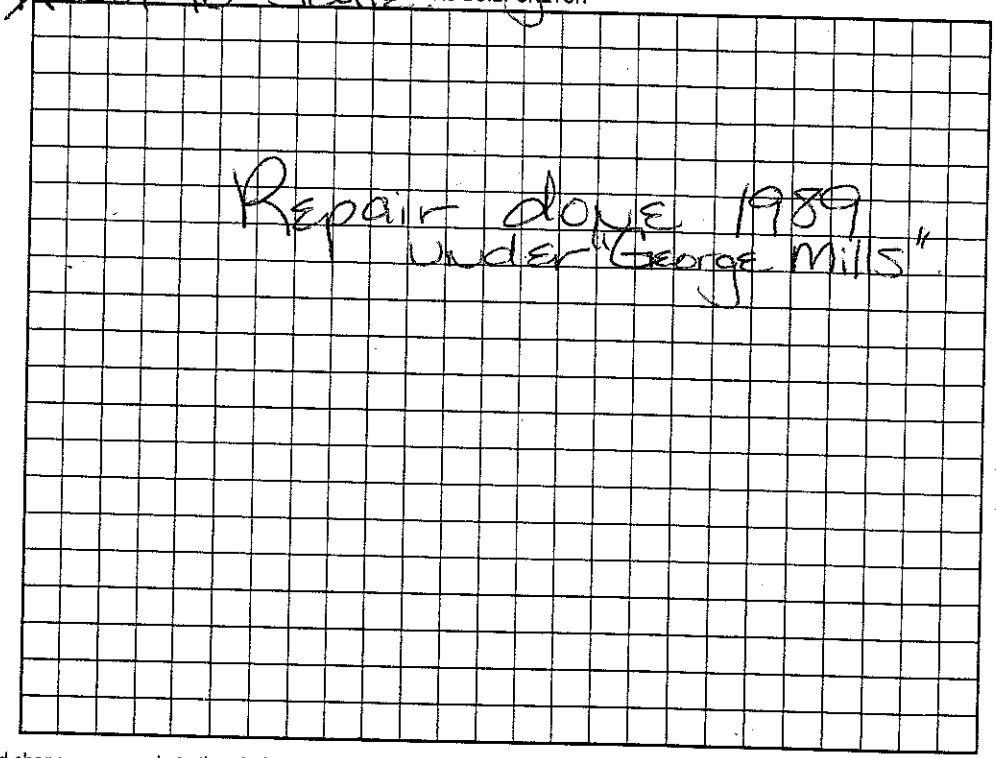
Comments:/Conditions: Septic System okay for 3 Bedroom + Study.

Comments:/Conditions: Existing Septic System appears to be functioning Okay. No problems Noticed. Keep New home 5' from Existing Septic System

INITIAL SITE SKETCH



Not to Scale 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: X Elizabeth Heiligenthaler date Installed by:

Improvement Permit by: Maria H. Watson RS date 10/30/2000 Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: Maria H. Watson RS date 10/30/2000

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