IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122802 PIN# ~~[illegible]~~ 4657-40-9222 DATE Jan 3 2005

OWNER OR CONTRACTOR [illegible] PHONE: Business ______ Home ______

ADDRESS 300 [illegible] Ave NW [illegible] N.C. 28027

LOCATION [illegible] TR [illegible] TR [illegible] Cir Dr to end across street on [illegible]

SUBDIVISION Edgewater Park BLOCK / SECTION ______ LOT 48 LOT AREA [illegible] SITE CLASS PS DESIGN FLOW 480 gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons: STB 794 Date 5/23/06
Pump Tank: 1000 Gallons: P.T. 283 Date 7/18/06
Pump Make: Goulds Model [illegible] Serial No ______
Nitrification Field: No. Fields 1 Square Feet 640/460 Linear Feet 320 (332)
No. Lines 5 Trench Width [illegible] Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I II III IV V VI
System Description: LPP
Repair System Description: LPP
Maintenance Agreement Required: ☑ Yes ☐ No
Gravel Depth NA

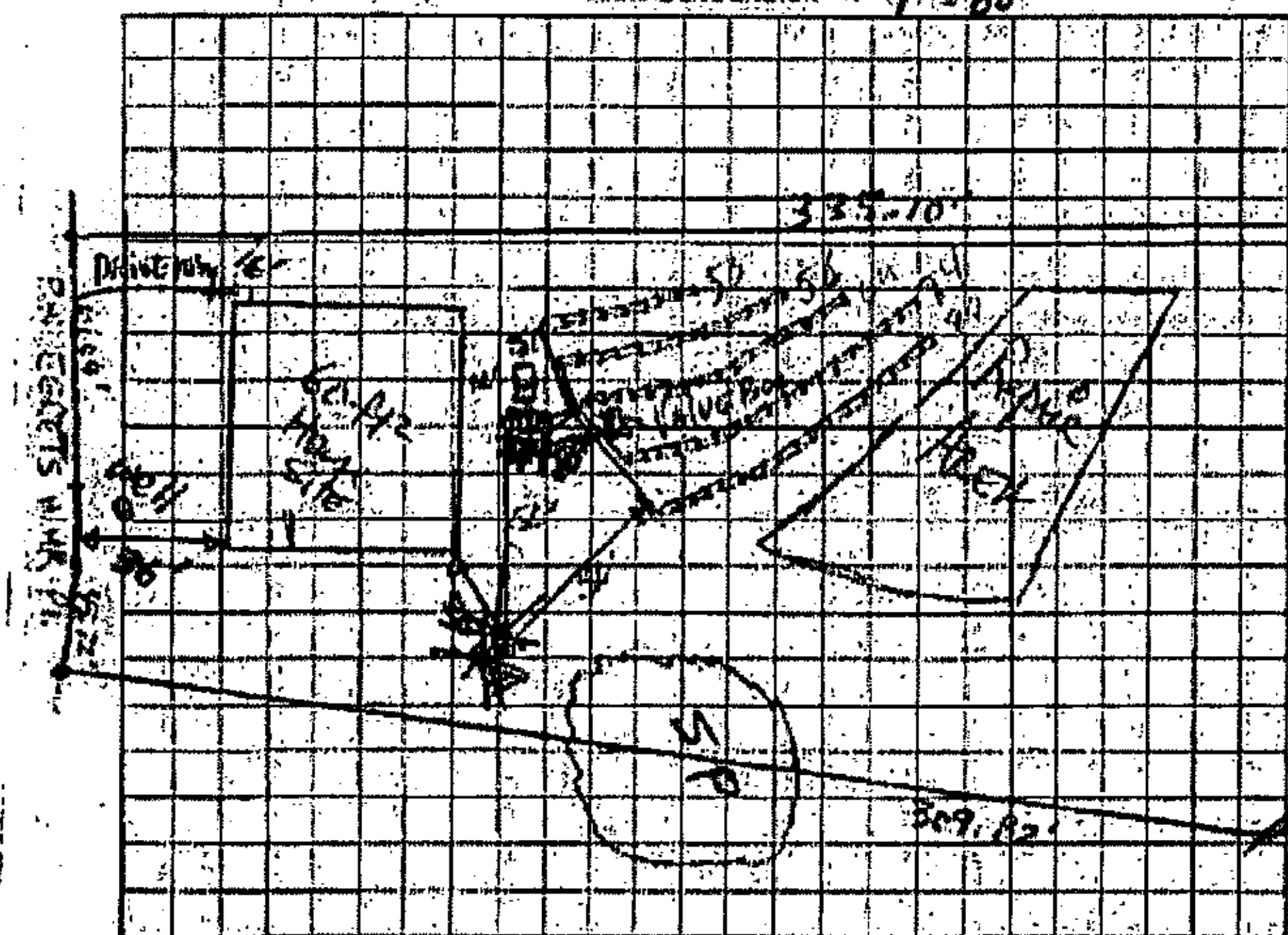
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ______
☐ Business No. Employees ______
☐ Other ______
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

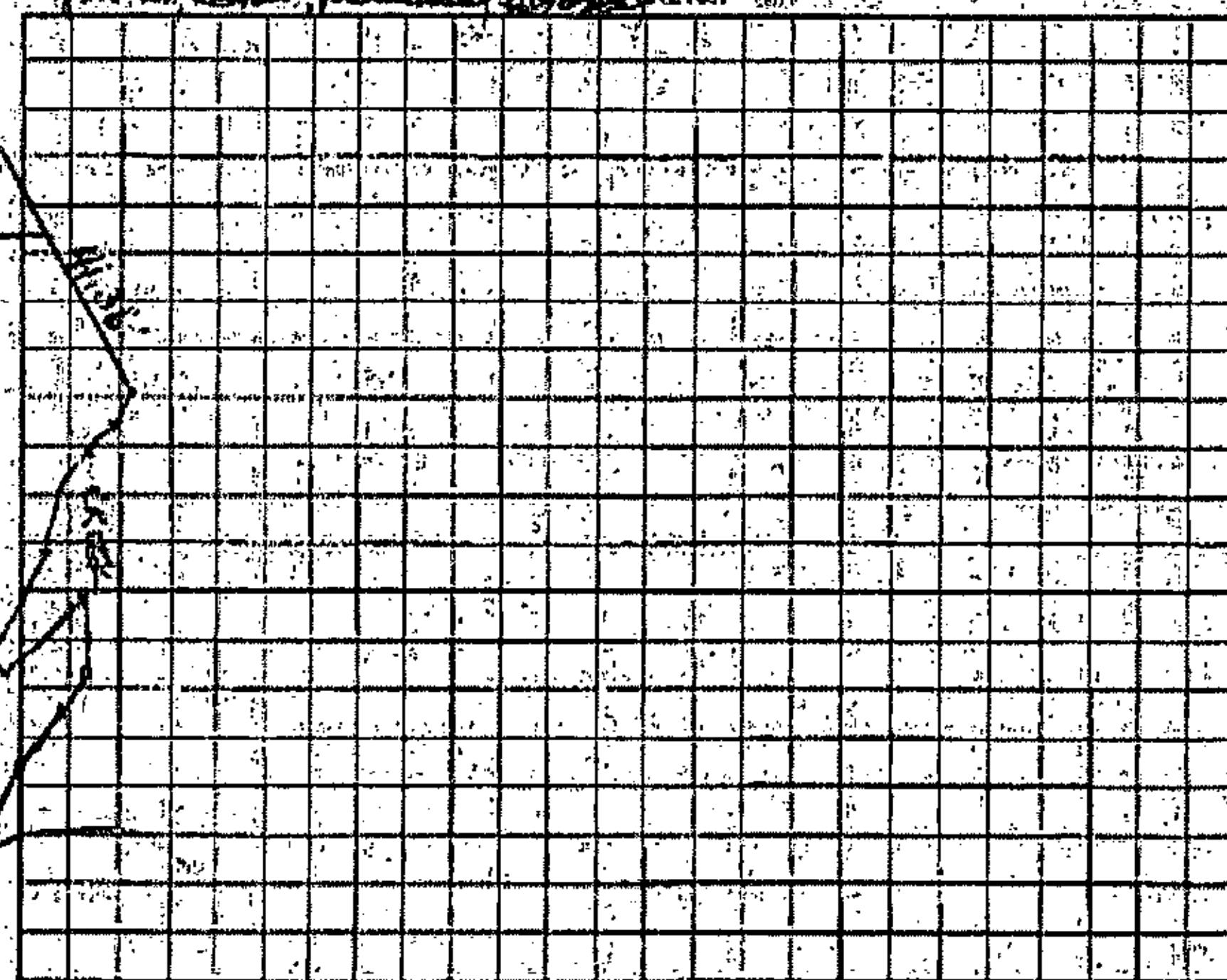
Comments/Conditions: [illegible] filter Required in pump tank
3/28/06 Reviewed Building plans site plan; Essentially in compliance with I.P.

Comments/Conditions: * Drive on other side
Well placed 25' in front of house SM

INITIAL SITE SKETCH 1"=60'



Tanks, Lines, Drainage, Driveway 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: [signature] date 3-1-05
Improvement Permit by: [signature] RS date Jan 3 05
Authorization to Construct by: [signature] RS date 3/28/06
Installed by: Larry Hinkle
Operation Permit by: [signature] RS date 8/24/06
Existing System Inspection by: ______ date: ______

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