IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

_____ Property Line measurements are clearly identified... _____ All proposed structures are indicated...

***SHOW:* proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site**

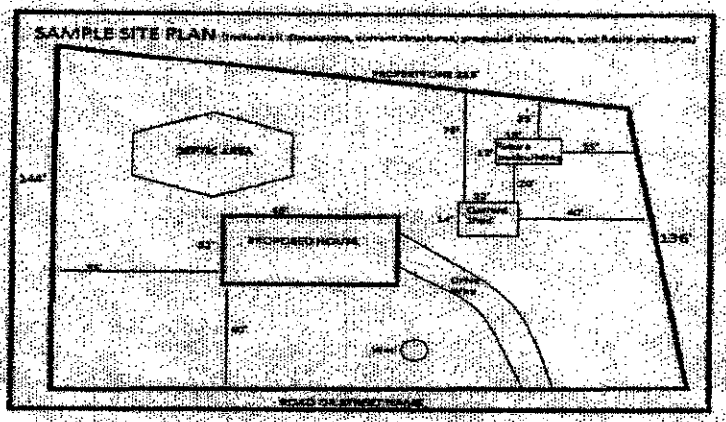
_____ Front and side setbacks from property line... _____ Preferred driveway location and configuration, preferred well location...

_____ Area you prefer your septic system to be placed... _____ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

_____ Location of septic systems and wells within 100' of your property... N/A

_____ Location of easements and rights of ways on your property... N/A _____ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Permit

Signature: _____ _____

***REQUIRED* property owner or owner's legal representative signature.**

9-16-15

DATE

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704/878-5205 · MOORESVILLE 704/664-5281

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

PERMIT# 12-335 PIN# 4735-18-1063 DATE 11/22/12

OWNER OR CONTRACTOR Matta Building Co PHONE/Mobile 704 528 6443 Fax

ADDRESS 173 Nash Speed Rd Troutman NC 28166

LOCATION Perth Rd, Perth Hill, East Past 2nd Building Lt

SUBDIVISION Lot BLOCK / SECTION 15 LOT 1013 LOT AREA SITE CLASS 52 DESIGN FLOW 360 LTAR .25

Septic Tank: Concrete Capacities: STG 1250 Date 3/31/05 | PIN/New System: ☐ Repair System Type: I, II, III, IV, V | Water/Household Items: No. Bedrooms 4 | Water Supply: ☐ Well/Individual ☐ Public ☐ Community

Pump Tank: Capacities: PT Date | System Description: Subsurface Trench | ☐ Mobile Home No. Bathrooms | ☐ Public

Pump Make: Model Serial No | Repair System Description: Conv Trenches | ☐ Business No. Employees | ☐ Community

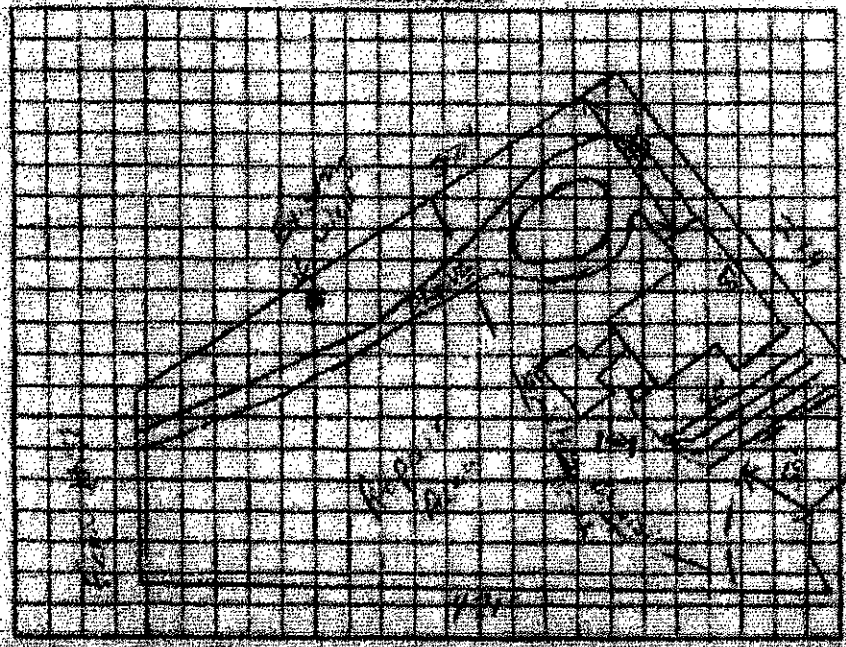
Manifold Field No. Fields 1 Square Feet 1050 Linear Feet 360 | Maintenance Agreement Required: ☐ Yes ☐ No | ☐ Other

No Lines 3 @ 30" Trench Width 36" Max Trench Bottom Depth 22" | Travel Tenth | ☐ Slope ☐ Curve Rock ☐ Expansion with Fencing ☐ Basement w/pumping

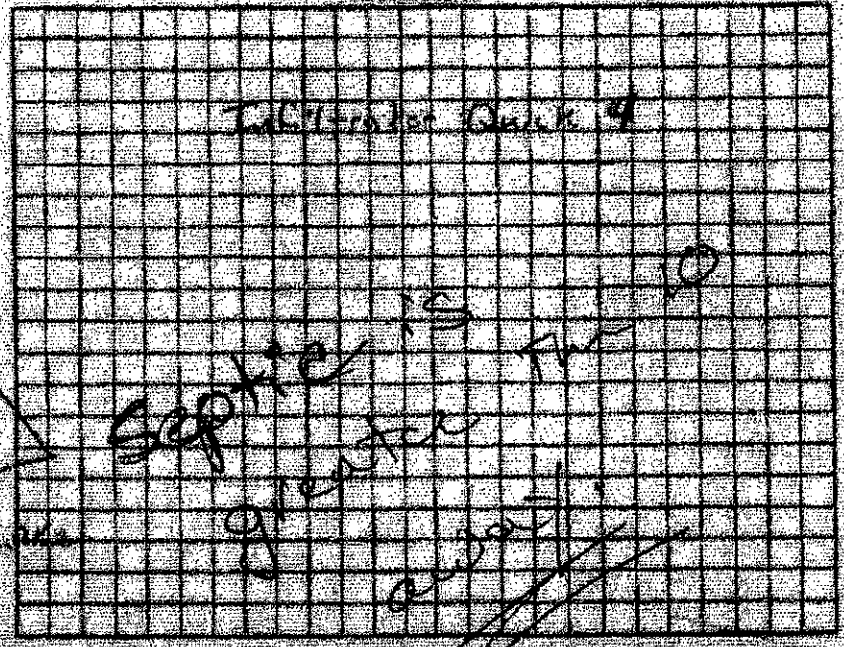
Comments/Conditions: 3

Comments/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied and/or pertaining to permit is unauthorized changes are made to the facility or unsatisfactory changes are made in the installation of the system. Improvement Permit with plan valid 5 years. Improvement Permit only, site plan valid for sixty (60) days. Authorization to Construct is valid for a period equal to that of Improvement Permit - not to exceed sixty months.

Signed [signature] Date 11/26/12 Issued by [signature]

Improvement Permit by [signature] Date 12/3/12 Operation Permit by [signature] Date

Authorization to Construct by [signature] Date 12/3/12 Existing System Inspection by [signature] Date

PINK IN FIELD / GOLD / WHITE GREEN COPY / YELLOW BROWN COPY / BROWN