IREDELL COUNTY HEALTH DEPARTMENT

(As built)

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

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

PERMIT # 145021 PIN # 4638332852.000 DATE 3/19/09

OWNER or APPLICANT William F. III & Linda Tucker PHONE: Business Home:

OWNER or APPLICANT ADDRESS 6610 Mayes Cove Ln. Charlotte NC 28270

LOCATION / DIRECTIONS Perth Rd. TL Normandy Rd on (R) no. end

SUBDIVISION CLST BLOCK / SECTION II LOT # 145 LOT AREA .799 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank 1000 Gallons: STB 1012 Date 10-10-07

Pump Tank 1000 Gallons: PT 17 Date 10-12-07

Pump Make Goulds Model WE1512HH Serial # 5005137717

Nitrification Field No Fields 1 No Lines 5 Linear Feet 250'

Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type I II III (IV) V VI

System Description: LP PPBPS

Repair System Description: Same

Maintenance Agreement Required ☑ YES ☐ NO

☐ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☑ Private Exist ☐ Public ☐ Community

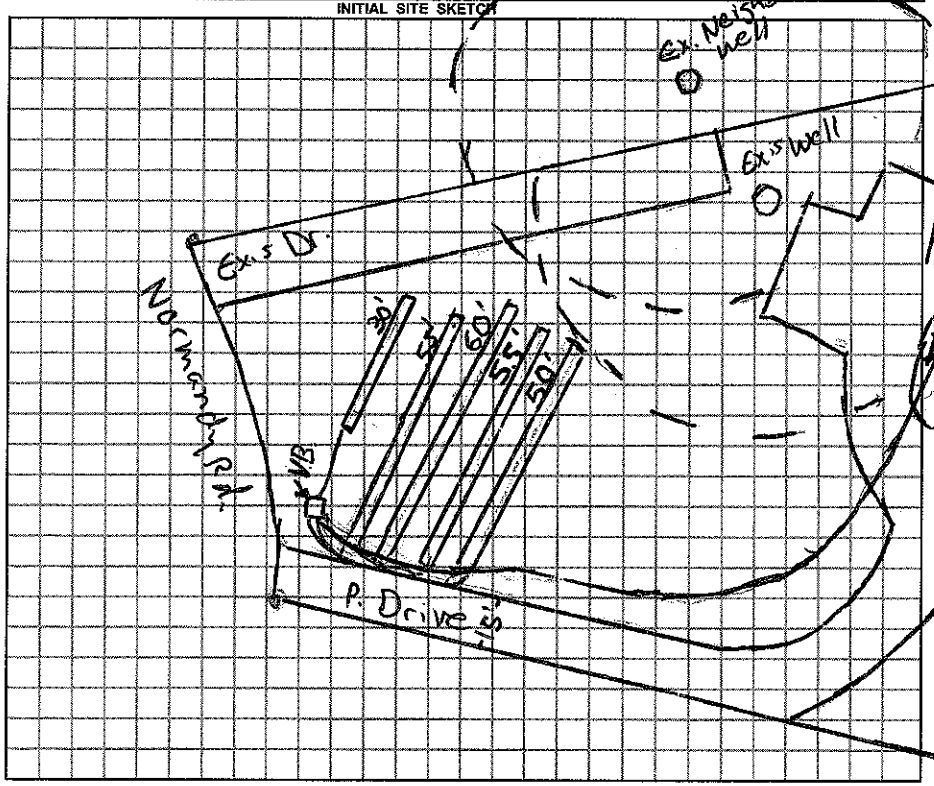
Comments / Conditions

Comments / Conditions

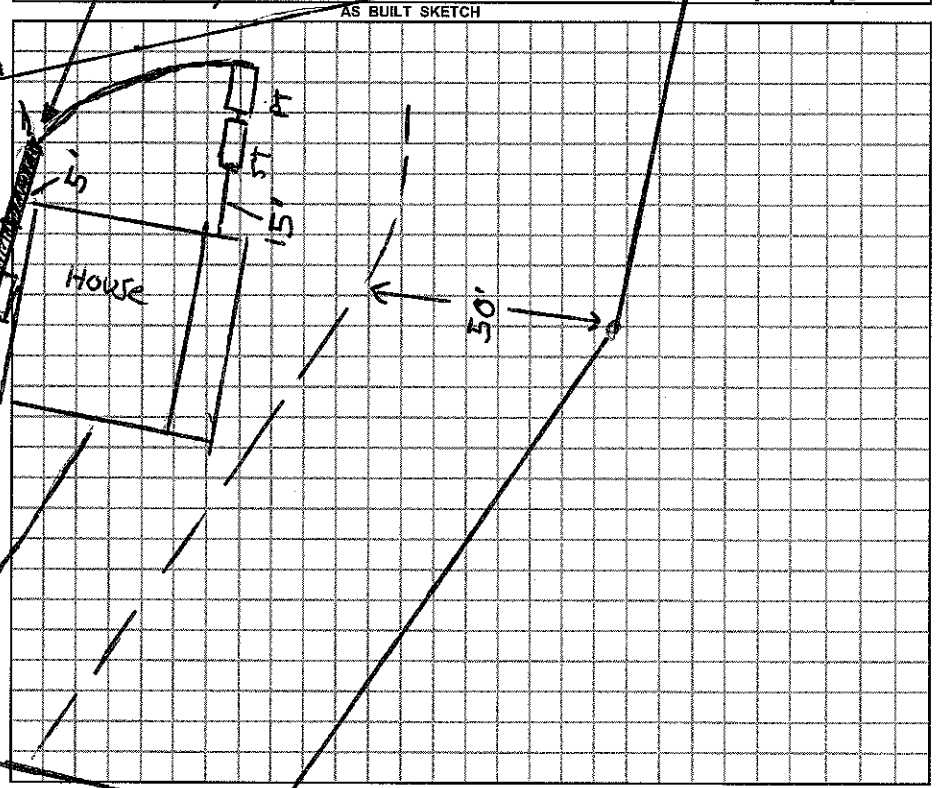
40' Ductile iron Sleeved supply line

1" = 40'

INITIAL SITE SKETCH



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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / 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 _____

Improvement Permit by: _____ Date _____

Authorzation to Construct by: _____ Date _____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Tommy Frye

Operation Permit by: Anthony Coker Jr. R.S. Date: 3/19/09

Existing System Inspected by: _____ Date: _____

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant

IREDELL COUNTY HEALTH DEPARTMENT

Ques 1110.00'

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

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

PERMIT# 145021 PIN# 4638332852.000 DATE 7/15/08

OWNER OR APPLICANT William F. III & Linda Tucker PHONE: Business _____ Home _____

ADDRESS 6610 Mayes Capel Ln. Charlotte NC 28270

LOCATION Perth Rd. TL Normandy Rd. on Right near end

SUBDIVISION CL&T BLOCK / SECTION II LOT 145 LOT AREA .799ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: 1000 Gallons; PT _____ Date _____

Pump Make: Goulds Model WE1512HH Serial No. 5005137117

Nitrification Field: No Fields 1 Square Feet Eq 1440 Linear Feet 250'

No Lines 5 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A ☐ Gravity ☑ Pressure

☑ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI

System Description: LPPPBPS

Repair System Description: Same

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other ____

Water Supply: ☑ Individual ☐ Public ☐ Community

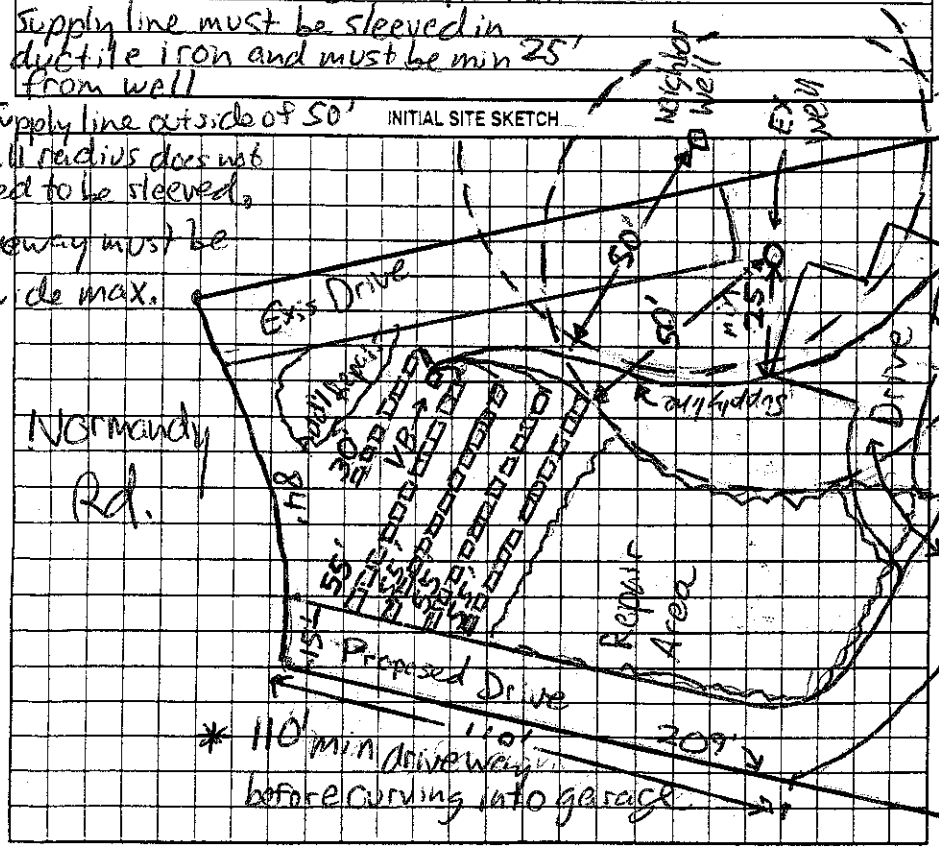
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: Maintain 50' min from all wells
Supply line must be sleeved in ductile iron and must be min 25' from well
Supply line outside of 50' well radius does not need to be sleeved.
* Driveway must be 15' wide max.

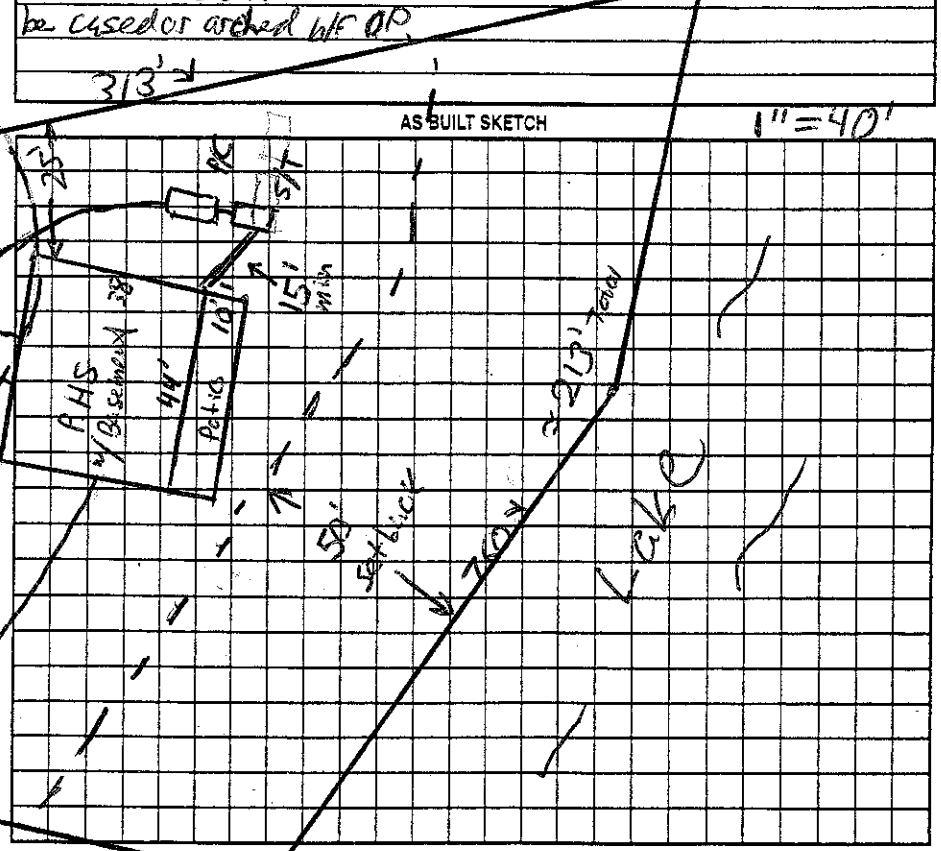
Comments/Conditions: 2nd floor office door must be cased or arched w/ OP

313'

INITIAL SITE SKETCH



AS BUILT SKETCH 1"=40'



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: Randall E. Broome date 7/17/08 Installed by: Tommy Frye

Improvement Permit by: Anthony Coleman Jr. date 7/15/08 Operation Permit by: _____ date _____

Authorization to Construct by: Anthony Coleman Jr. date 7/15/08 Existing System Inspection by: _____ date _____

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