4.00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 081210 PIN# 4639351516 Mark Pope DATE 3-9-2000

OWNER OR CONTRACTOR Sam Owen PHONE: Business 309-4499 Home (704) 528-5113

ADDRESS 222 FairFax Dr. Winston-Salem, NC 27104

LOCATION Perth Rd North TL Fern Hill TR Marietta on right ~ 2/5 Mile

SUBDIVISION CLaT BLOCK / SECTION 16 LOT 54 LOT AREA .68 Acres SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 3-17-01
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 960' Linear Feet 300'
No Lines 6 at 50' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: Partial Repair - Panel Blk
Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees ____
☐ Other ____
Gravel Depth N/A ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

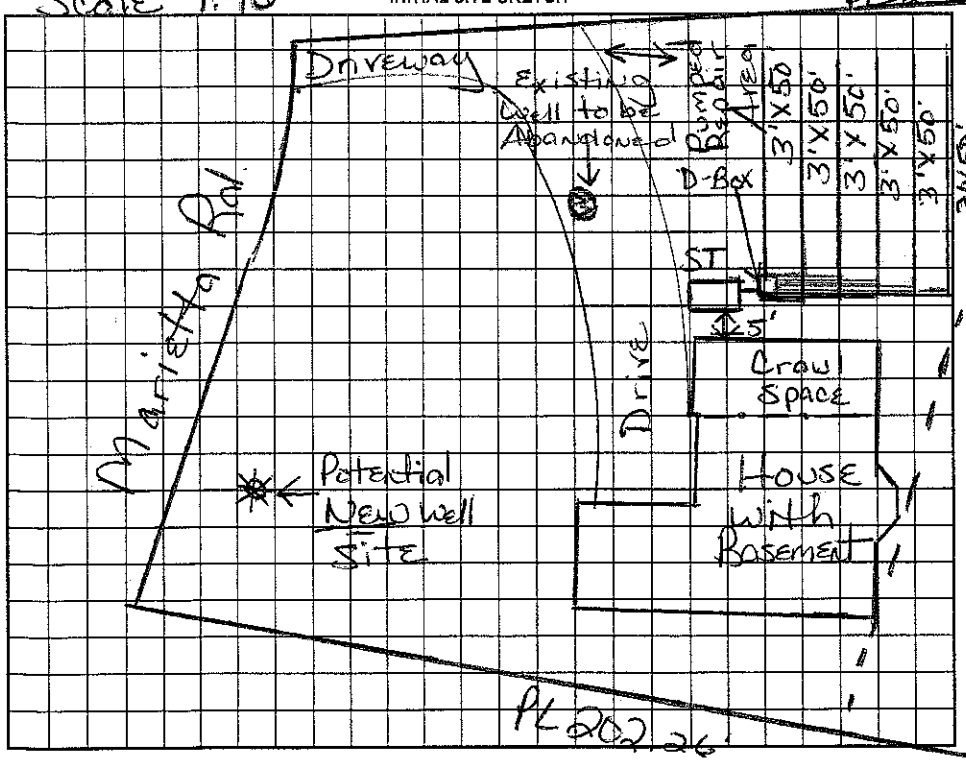
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: ★ Must keep Septic System at least 15' (Side gradient) from Basement wall/Foundation drain & 50' from lake & 10' from PL. Septic System can be 5' from Crawl space.

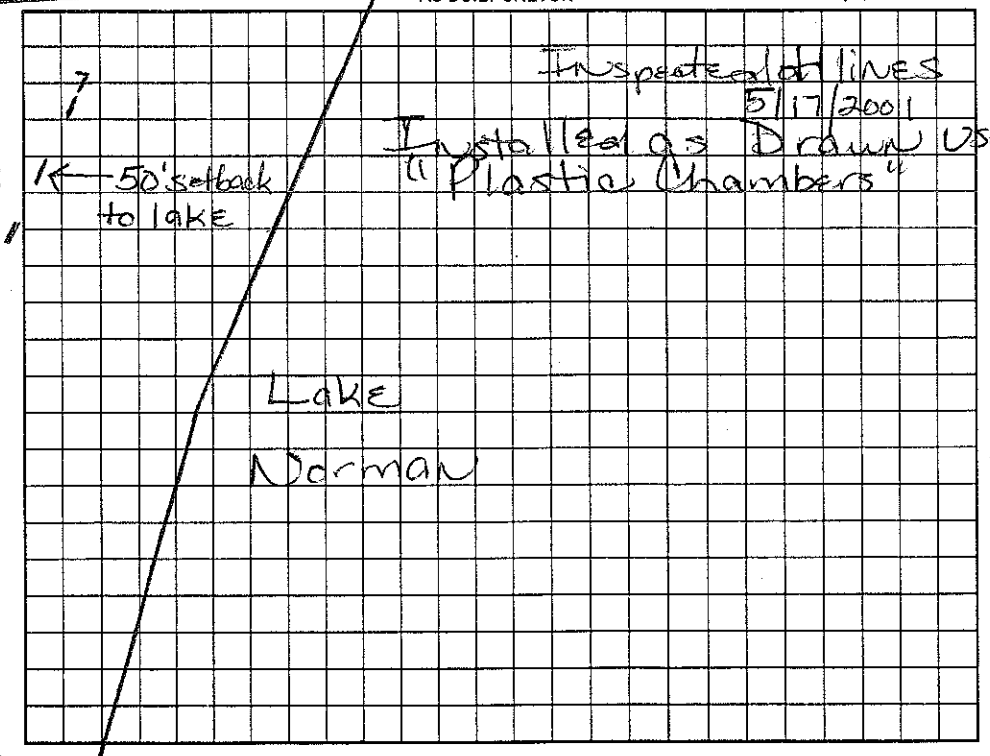
Comments:/Conditions: Lot deeded prior to 1982 — Must abandon old well prior to Septic System installation. Well abandoned 5/29/01 Checked tanks & upper 4 lines

Scale 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 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: D. Mark Pope date 3/10/2000 Installed by: Wes Lytton RS

Improvement Permit by: Maria H. Dotson R.S. date 3/9/2000 Operation Permit by: Maria H. Dotson date 5/29/2001

Authorization to Construct by: Maria H. Dotson R.S. date 3/9/2000 Existing System Inspection by: ____ date ____

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