IREDELL COUN HEALTH DEPARTMENT

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

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

PERMIT# 127614 PIN# 4639352167 4639 35 2159 wendell DATE 5-5-05

OWNER OR CONTRACTOR Foothills Land & Development PHONE: Business 828 217-4670 Home 726-9405

ADDRESS 52 River Point Ct. Hickory, NC 28601

LOCATION Perth Rd North TL Fern Hill TR Marietta on left past Fern Hill Baptist Church

SUBDIVISION Meritta Overlook BLOCK / SECTION ____ LOT 6 LOT AREA .2045 Acre SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. 1.3

Septic Tank: 1000 Gallons; STB 1160 Date 8/04/05
Pump Tank: 1000 Gallons; PT 319 Date 9/24/05
Pump Make: Gouldss Model WE6-511H Serial No. 7605
Nitrification Field: No Fields 1 Square Feet 554' Linear Feet 277
No Lines 4 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Pump-LP Panel Block
Repair System Description: same
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3.5
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Approved attached plan submitted by S & EC and Licensed Soil Scientist Wendell Overby.

Comments/Conditions:

INITIAL SITE SKETCH

See attached plan.

AS BUILT SKETCH

The proposed / existing Deck addition does not appear to impact the existing septic system.
**NOTE: Shall be min. 5' from septic tank
Andy Melville R.S.
Date: 7-20-17
ICHD-Environmental Health Division

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: ____ date 5/6/05 Installed by: Gary Leatherman RS

Improvement Permit by: Maria H. Dolan RS date 5/5/05 Operation Permit by: Maria H. Dolan RS date 2/16/06

Authorization to Construct by: Maria H. Dolan RS date 5/5/05 Existing System Inspection by: ____ date ____

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