Tommy 902-1380

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 138708 PIN# ~~4639616 8202~~ 4639667347 DATE 10-27-06

OWNER OR APPLICANT Richard Ervin PHONE: Business 252-623-1965 Home 704-528-6392 (Bill or 704-491-9276 Ervin-Dad)

ADDRESS 112 Barkside Ln Newburn NC 28562

LOCATION Perth Rd N TL Fern Hill on left across from 680 Fern Hill

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. 3gpd/ft² 30" trench depth

Septic Tank: ~~1000~~ ST Gallons; STB 1011 Date 9-30-06 ☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

Pump Tank: 1500 Gallons; PT _____ Date _____ System Description: 2590 reduction gravity

Pump Make: Installed Model _____ Serial No. _____ Repair System Description: 2590 reduction gravity

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400 Maintenance Agreement Required: ☐ Yes ☒ No

No Lines 5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth NA ☒ Gravity ☐ Pressure

☒ House/Mod. Home No. Bedrooms 4 ☐ Mobile Home No. Persons ____ ☐ Business No. Employees ____ ☐ Other _____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions:

Flow Splitter such as Zoeller

228' (254' overall)

Plumbing in workroom connected to house

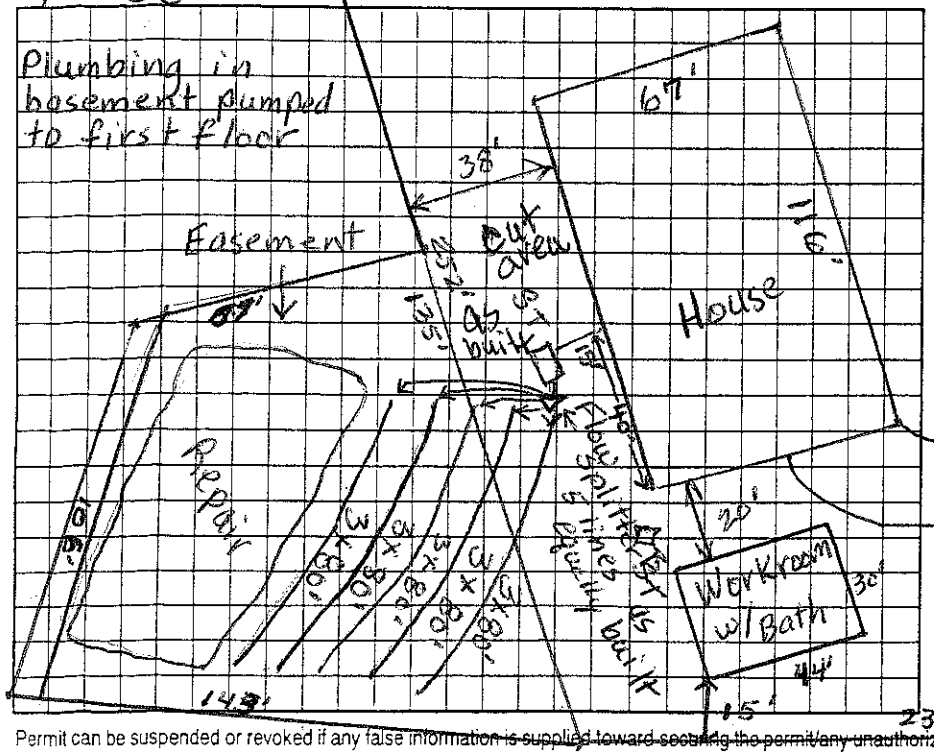
Comments:/Conditions:

Hold AC until deeds recorded for property and easement

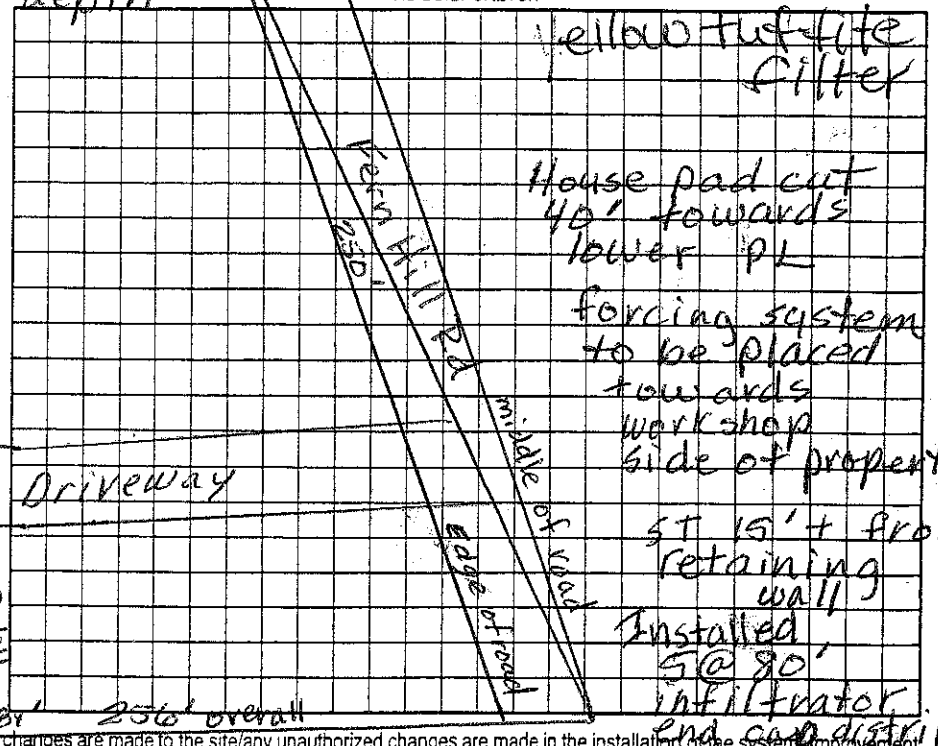
30" max. trench depth

1"=50'

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: Bill Ervin date 10/31/06 Installed by: Tommy Frye

Improvement Permit by: Judy Melville date 10-27-06 Operation Permit by: Judy Melville date 8-2-07

Authorization to Construct by: Judy Melville date 12-7-06 Existing System Inspection by: _____ date _____

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