IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 325.00 Paid MOORESVILLE 704-664-5281 3:04

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

11720?

PERMIT# 11720/079678 PIN# 4645-17-0915 DATE 6/6/01

OWNER OR CONTRACTOR Graham Pitt / DARRELL HOKE PHONE: Business _____ Home _____

ADDRESS 3100 Suffolk Dr. Shelby NC 28152

LOCATION Templ. Rd 0.00 DJ; Alcove TR Templeton Rd, bear (R) on (L) before curve

SUBDIVISION GREEN INVESTMENT BLOCK / SECTION _____ LOT 4 LOT AREA 25000 Ft² SITE CLASS. RS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 9/27/04
Pump Tank: 1000 Gallons; PT 27 Date 7/16/04
Pump Make: Goulds Model NE-312 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 798 Linear Feet 266
No Lines 3 @ 87 Trench Width 3' Max Trench Bottom Depth 36" ~~Gravel Depth~~ SAND.

[X] New System [ ] Repair System Type: I, II, III, [IV], V, VI
System Description: LP - 16" PPBPS
Repair System Description: SAME
Maintenance Agreement Required: [X] Yes [ ] No

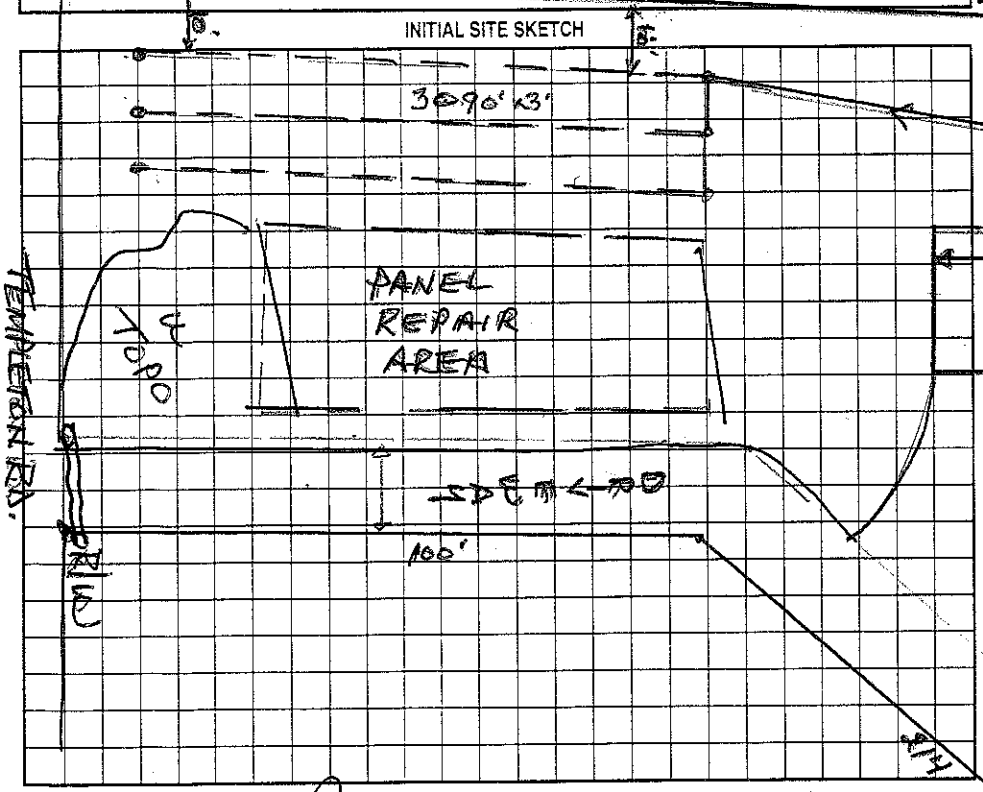
[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Bathrooms 3.5
[ ] Business No. Employees ____
[ ] Other _____
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

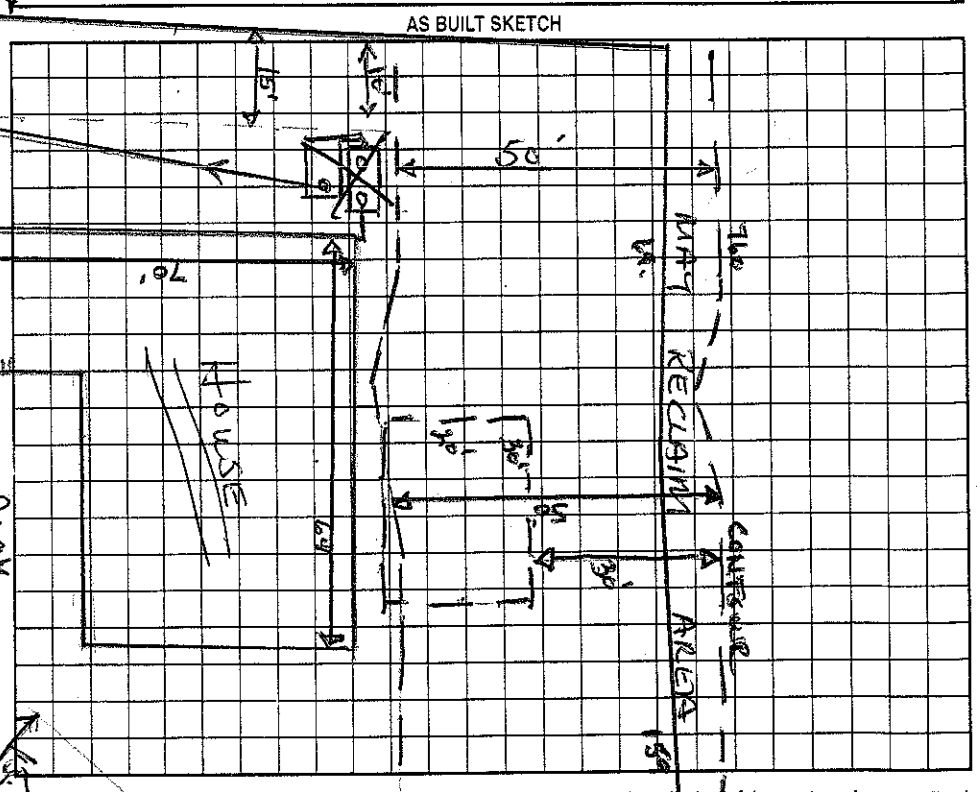
Comments:/Conditions:

Comments:/Conditions: TANKS RELOCATED TO FRONT OF HOUSE
11/2/04 - LINES TRENCHED 11/18 - Pressure

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: X Ronnie Pitt date 6/22/01 Installed by: R+H

Improvement Permit by: Wesley Sparks RS. date 6/6/01 Operation Permit by: Wesley Sparks RS date 12/9/04

Authorization to Construct by: Wesley Sparks RS. date 6/6/01 Existing System Inspection by: _____ date _____

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