IREDELL COUNTY HEALTH DEPARTMENT

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

10:30

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

PERMIT# 122 219 PIN# 4696-28-4611.35 4646-29-4885 DATE Jan 4, 06

OWNER OR CONTRACTOR Sundown Cove LLC / RYAN HOMES PHONE: Business _____ Home _____

ADDRESS 9606-A Caldwell Commons Cir, Cornelius, N.C. 28031

LOCATION 150 W. TR Williamson TR Sundown TR Eclipse Way on left

SUBDIVISION Estates @ Sundown BLOCK / SECTION _____ LOT 35 LOT AREA .57AC SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. No. 3 in trenches @ .25-.38gpd/sf Aldo

Septic Tank: 1000 Gallons; STB 794 Date 4-23-0

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5 Trench Width 36" Max Trench Bottom Depth 24"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Shallow Gravity 25% Reduction

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth NA

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other _____

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

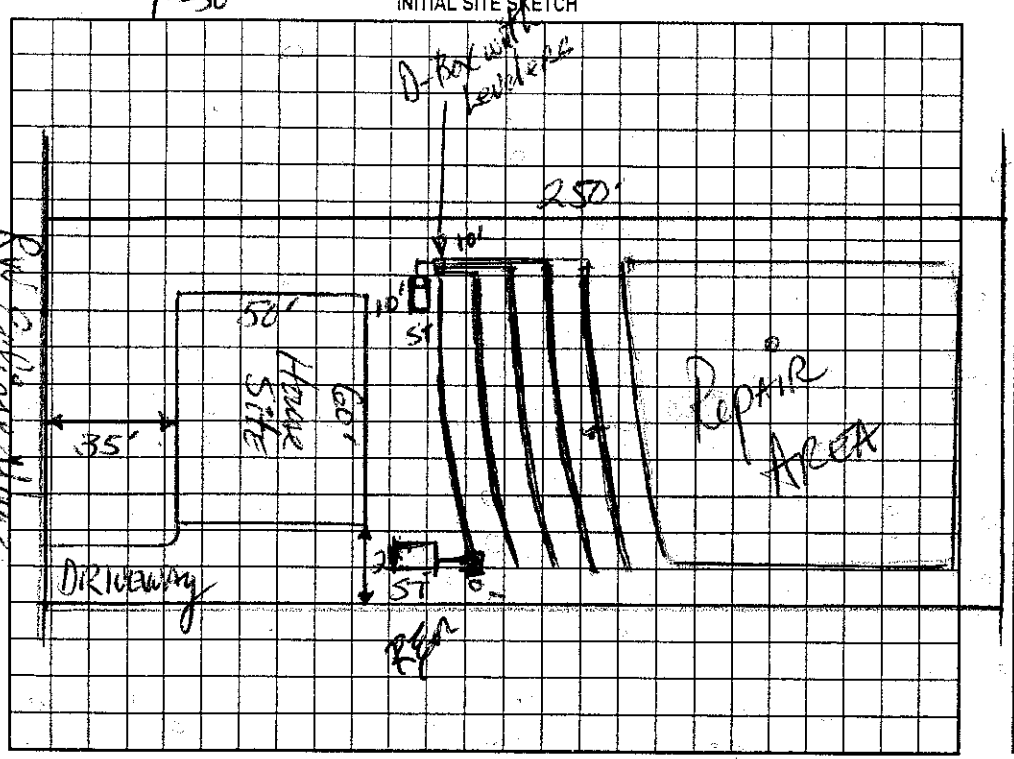
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions:

Comments/Conditions: 5/25/06 Lines & tanks Checked by MD

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed EZ Flow essentially as Drawn

The proposed / existing ADDITION addition does not appear to impact the existing septic system.

**NOTE: _____ REHS

Date: 6-21-06

ICHD-Environmental Health Division

ADDITION NOT TO GO OVER ANY PART OF SEPTIC

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 _____

Improvement Permit by: _____ date Jan 4, 06

Authorization to Construct by: _____ RS. date 1/31/06

Installed by: R & H

Operation Permit by: _____ date 5-31-06

Existing System Inspection by: _____ date _____

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