IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 330.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# ~~7717~~ 115002 PIN# 4644667668 DATE 7/2/2002

OWNER OR CONTRACTOR Angie Gibson/Pace Contractors PHONE: Business _____ Home _____

ADDRESS 3212 Sharon Rd/Charlotte, NC 28211

LOCATION Brawley School Rd TL Gibbs Rd TR Hickory Hill Circle 154 Hickory Hill Rd

SUBDIVISION Gibbs Cove BLOCK / SECTION L 2 LOT ~~117~~ 115 AREA LOT 23/23A SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .37

Septic Tank: 1000 Gallons; STB 794 Date 9-14-23

Pump Tank: 1000 Gallons; PT 283 Date 9-13-03

Pump Make: Myers Model ME 50 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 308

No Lines ~~5~~ 4 ~~260~~ Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: Pump-25% Reduction off site

Repair System Description: Pump-Innovative

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 3 No. Employees _____

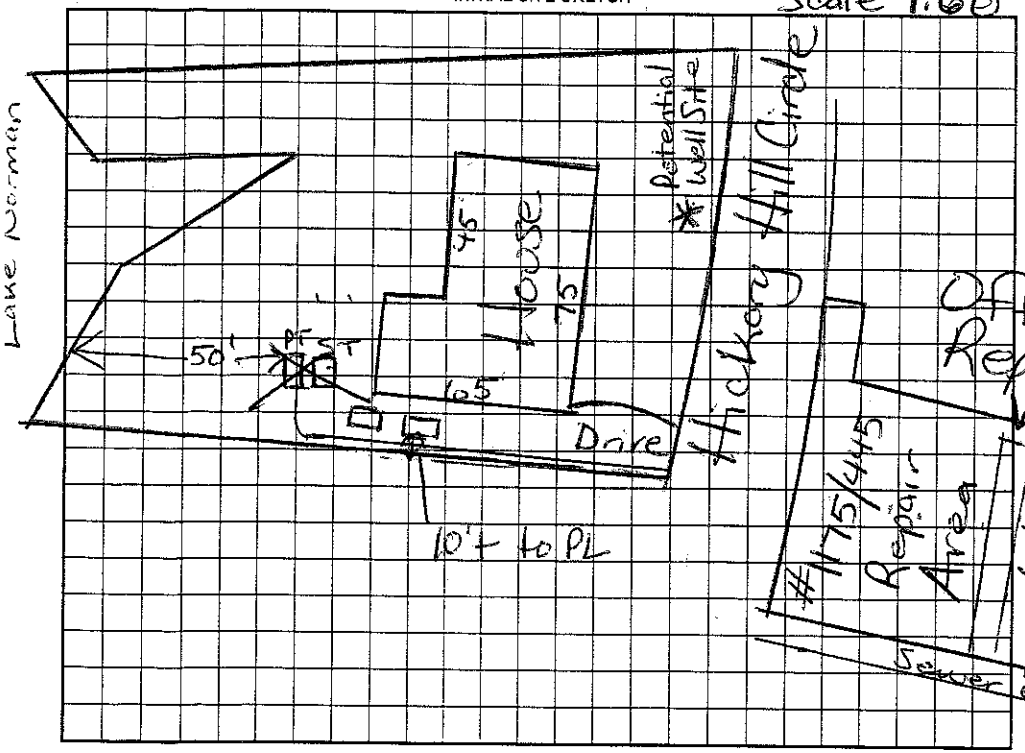
Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth N/A ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: Remove old berms and terraces. Keep Septic System at least 10' From PL, 100' to well & 50' to lake.

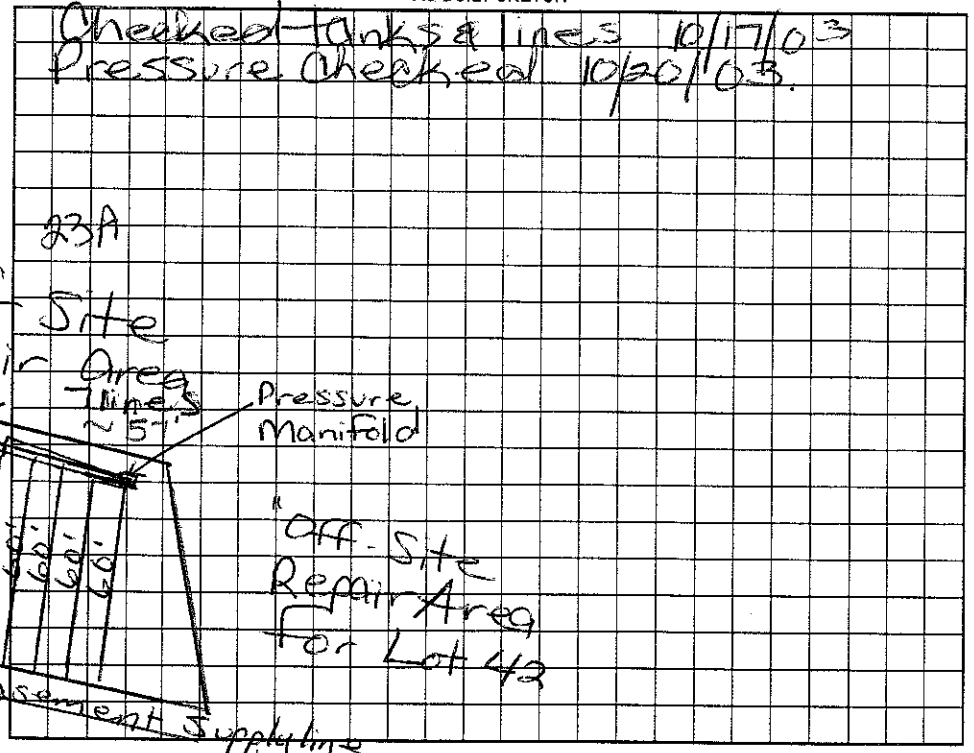
Comments/Conditions: Reviewed building plans 8/8/03, drive on other side is okay (Side entry) garage. Septic drainfield located off site

INITIAL SITE SKETCH Scale 1:60



AS BUILT SKETCH

Checked tanks & lines 10/17/03 Pressure checked 10/20/03.



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: Angie Gibson date 7-15-03 Installed by: Richard Abernathy

Improvement Permit by: Maria H Dobson RS date 7/2/2002 Operation Permit by: _____ date 9/26/04

Authorization to Construct by: Maria Dobson RS date 8/8/03 Existing System Inspection by: _____ date _____

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