IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 500.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 06329 (1790 ~~7566~~) PIN# 4646 68 ~~7539~~ 7566 DATE 10/25/01

OWNER OR CONTRACTOR Velco Development LLC PHONE: Business 704-655-8590 Home

ADDRESS 18220 Jetfoil Way Cornelius, NC. 28031 (108 Hickory Hill Rd.)

LOCATION Brawley School Rd. TR Dibbs Rd. TR Apple Blossom Lane (L) on Hickory Hill, on (R) just before Neils house

SUBDIVISION Dibbs Cove BLOCK / SECTION LOT 1 LOT AREA 44266 SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 160 Date 6/21/02 ☒ New System ☐ Repair System Type: I, II, III, (IV), V, VI

Pump Tank: 1000 Gallons; PT 319 Date 1/12/02 System Description: LP → 16" PPBPS *

Pump Make: MYERS Model ~~ME50-18~~ Serial No. ~~2102E0901~~ Repair System Description: SAME

Nitrification Field: No Fields 1 Square Feet 534 Linear Feet 267 Maintenance Agreement Required: ☒ Yes ☐ No

No Lines 4@67' Trench Width 2-3' Max Trench Bottom Depth 3' ~~Gravel Depth~~ SAND. ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

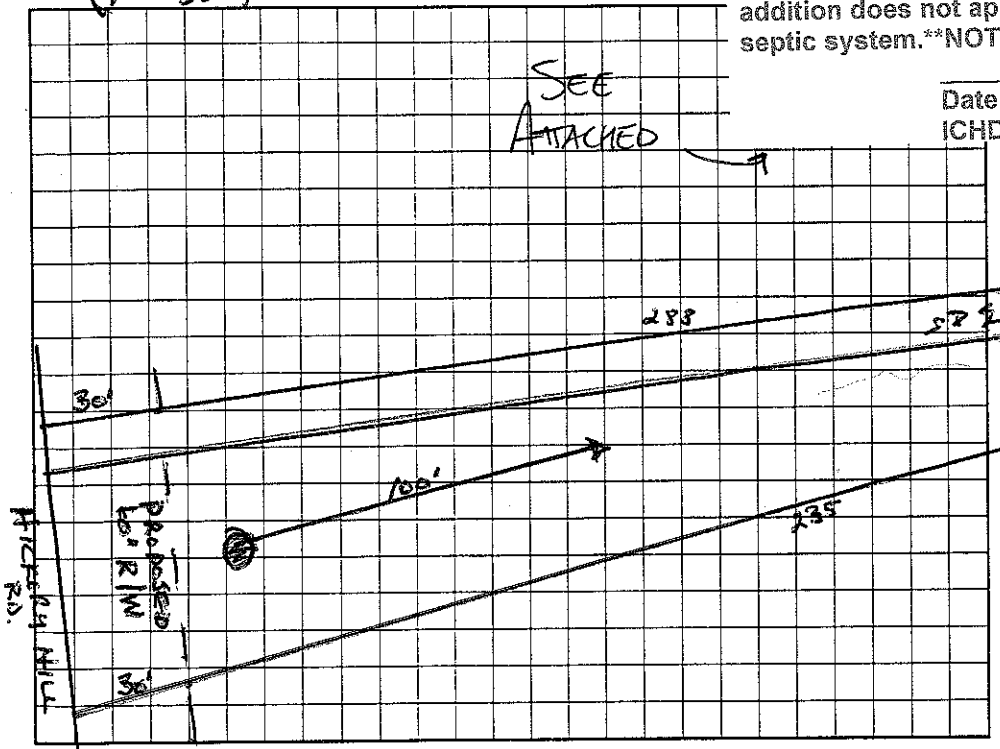
☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: This is a 50% reduced system - install inlets required on this permit.

Comments:/Conditions:

(1" = 50') INITIAL SITE SKETCH



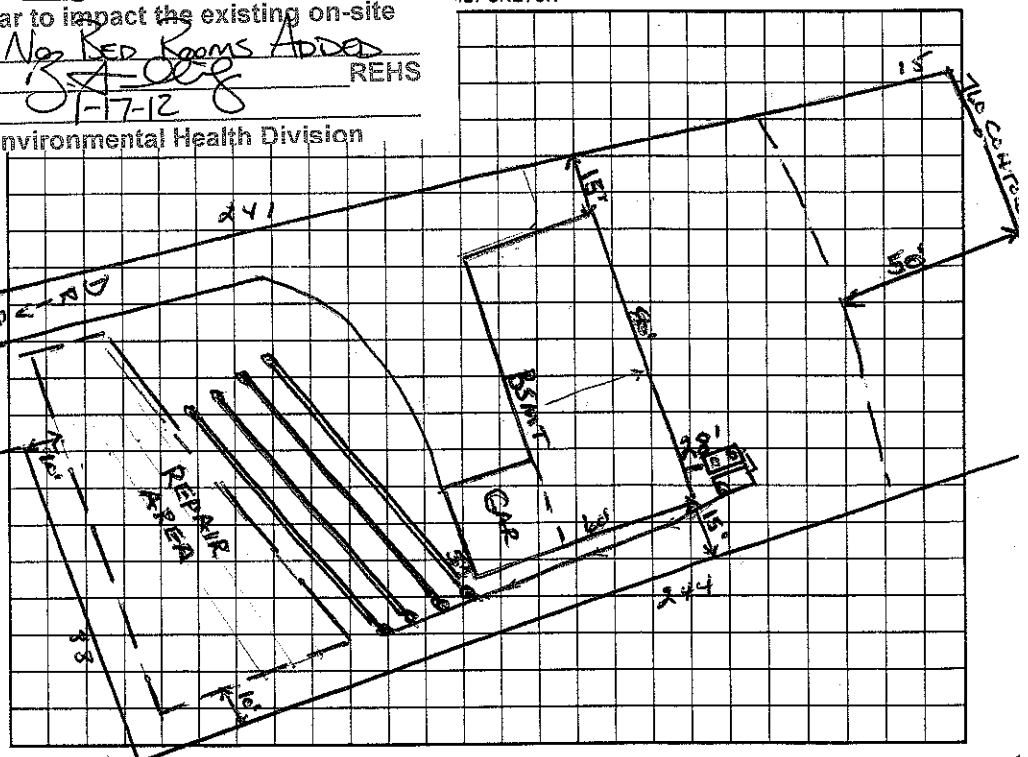
Location of the proposed ADDITION addition does not appear to impact the existing on-site septic system.**NOTE: No Red Rooms Added

REHS

Date: 1-17-12

ICHD-Environmental Health Division

ILT 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: [signature] date 1-24-02 Installed by: McCloud Const.

Improvement Permit by: Wesley Sparks RS date 10/25/01 Operation Permit by: Wesley Sparks RS. date 6/17/03

Authorization to Construct by: Wesley Sparks RS date 10/25/01 Existing System Inspection by: date

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