IREDELL COUNTY HEALTH DEPARTMENT

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

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

$175.00 Paid

PERMIT# 103038 ~~+799~~ PIN# 4648 68 7537 4646 68 8347 DATE 9/25/01

OWNER OR CONTRACTOR Valco Development / McDonald PHONE: Business 704-655-8570 Home

ADDRESS 18220 Taffrail Way Cornelius, NC. 28031 122 Hickory Hill Rd

LOCATION 1100 TL Dibbs Rd. TR Apple Blossom Lane (L) on Hickory Hill on (R) before Neils home

SUBDIVISION ~~GIBBS COVE~~ BLOCK / SECTION LOT 3 LOT AREA 44529 SITE CLASS. P5 DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 160 Date 10/25/01
Pump Tank: 1000 Gallons; PT 319 Date 9/9/01
Pump Make: ~~Myers~~ 50A1 Model ~~HYDROMATIC~~ Serial No. 10-01
Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 @ 100' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth No

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Pres. Man. — EZ Flow ORCH. PLUS
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other

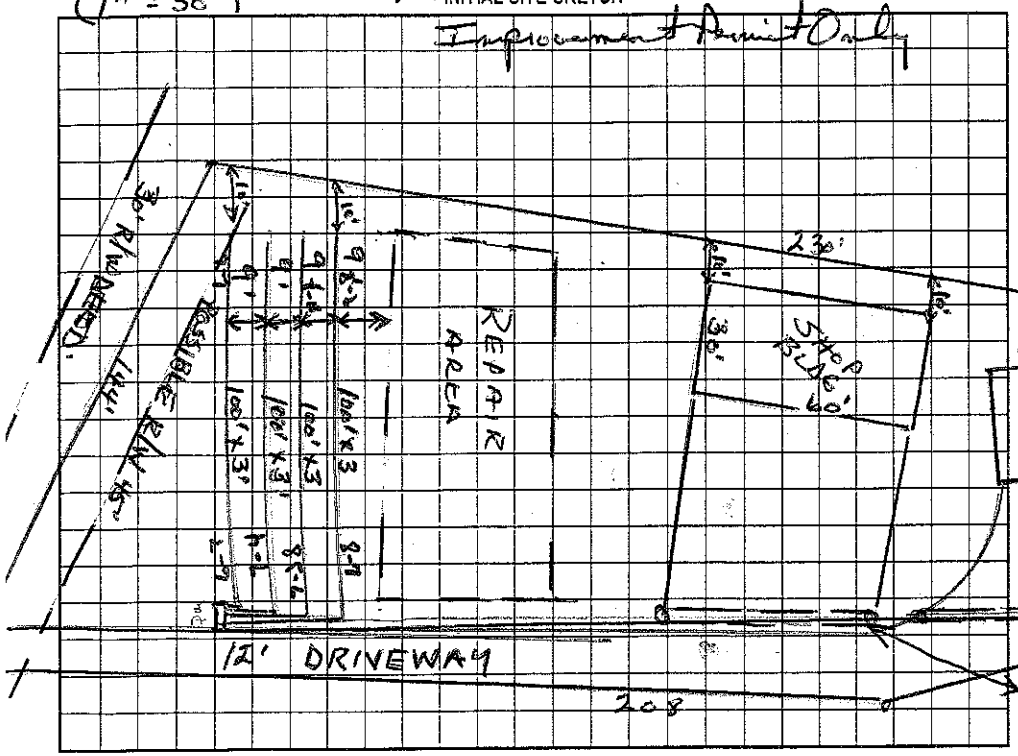
☒ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

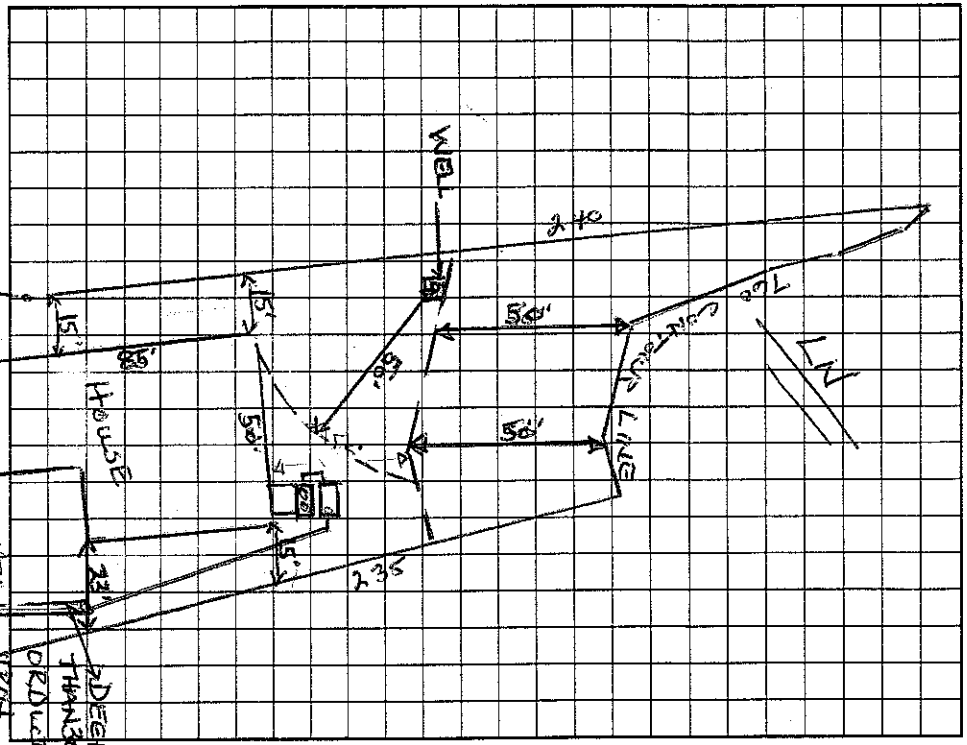
Comments:/Conditions: Well must go where shown here; Large house very little room for variation; Any change to be approved by ICHD prior to implementation 25% Reduction figured here

Comments:/Conditions:

INITIAL SITE SKETCH (1" = 50')



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: [signature] date 9-27-01

Improvement Permit by: Wesley Sparks RS. date 9/25/01

Authorization to Construct by: Wesley Sparks RS. date 10/3/01

Installed by: Method

Operation Permit by: [signature] RS date 5/22/02

Existing System Inspection by: date

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