Ar

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 300.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 1791/118824 PIN# 4646 68 7442 DATE 10/5/01

OWNER OR CONTRACTOR Veloy Development LLC PHONE: Business 704-655-8570 Home

ADDRESS 18220 Taffrail Way Cornelius, NC. 28031

LOCATION Brawley School Rd. TL Gibbs Rd. TR Apple Blossom bear (L) on Hickory Hill Rd on (R) before at pool

SUBDIVISION Gibbs Cove BLOCK / SECTION LOT 2 LOT AREA ~1.28 AC. SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 5/28/04

Pump Tank: 1000 Gallons; PT 27 Date 6/7/04

Pump Make: Goulds Model 1/2 HP. Serial No.

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

[X] New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: PM - EZ Flow or Ch. Plastic

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes [X] No

[X] House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees

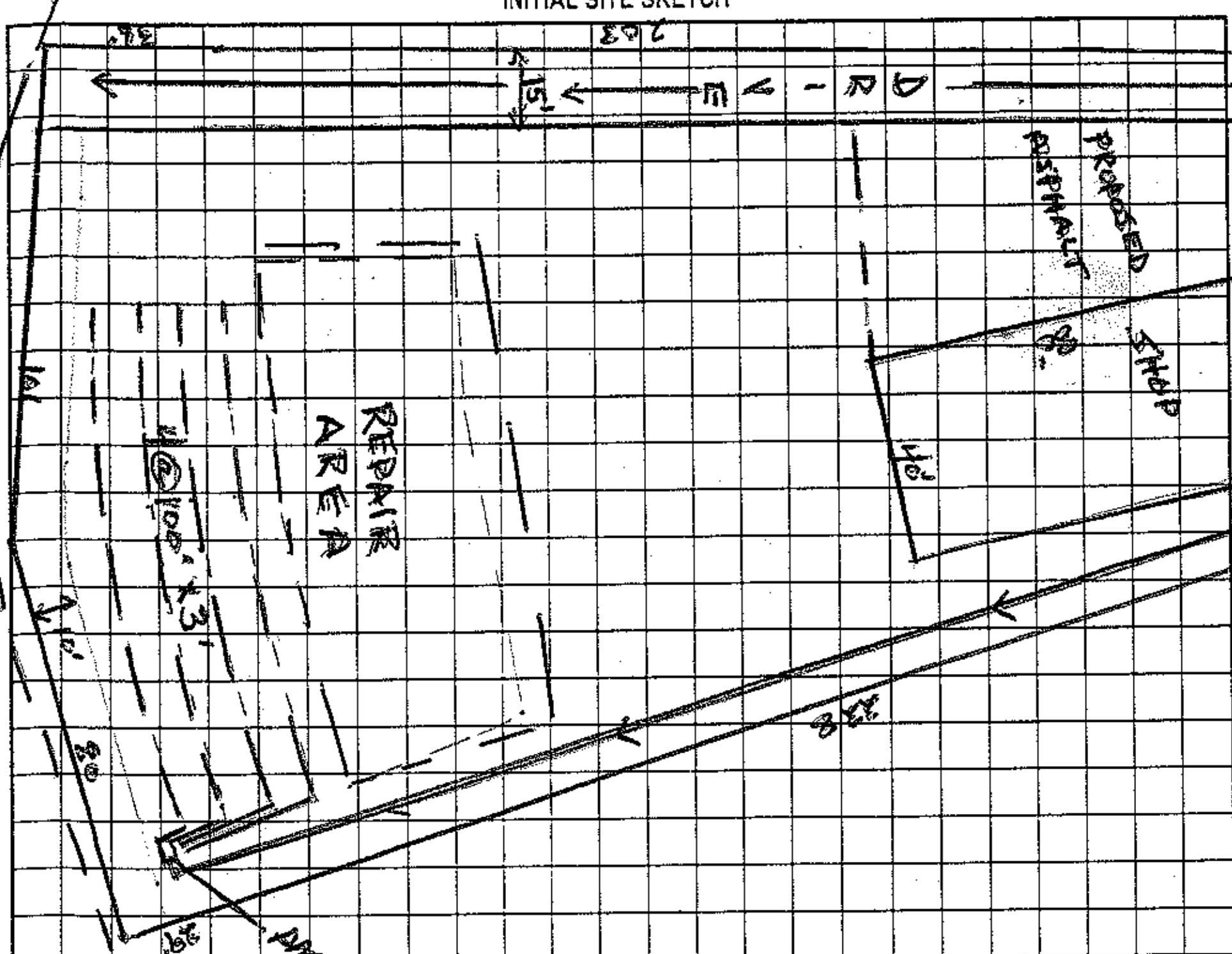
☐ Slab ☐ Crawl Space [X] Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments/Conditions:

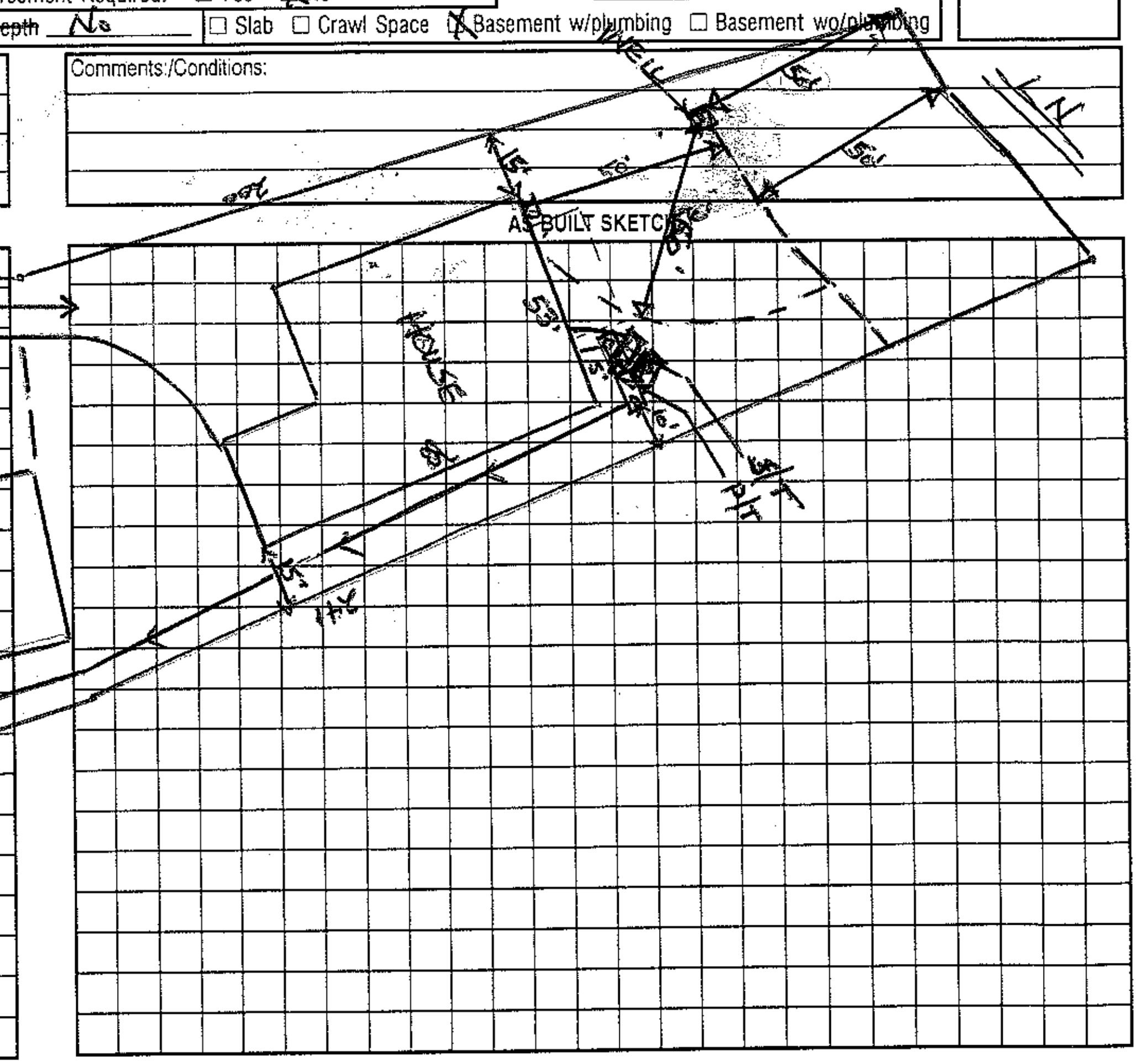
Comments/Conditions:

INITIAL SITE SKETCH



HICKORY HILL LN.

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: * Glen D Clark Jr date 1-24-02

Installed by: Joe Perkins

Improvement Permit by: Wesley Sparks R.S. date 10/5/01

Operation Permit by: Wesley Sparks R.S. date 10/15/04

Authorization to Construct by: Wesley Sparks R.S. date 10/5/01

Existing System Inspection by: date

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