IREDELL COUNTY HEALTH DEPARTMENT

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

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

130.00 Paid 11.00

PERMIT# 13017 PIN# 4649044918 DATE Aug 5, 05

OWNER OR CONTRACTOR Phil Schempp / Corinthian Dev. PHONE: Business Home

ADDRESS P.O. Box 990, Denver, N.C. 28037

LOCATION Peeler Rd North TR Greycliff Dr. on Right at cul-de-sac

SUBDIVISION Greycliff BLOCK / SECTION LOT 20 LOT AREA .8 Ac SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .025

Septic Tank: 1000 Gallons; STB 55 Date 7/30/05
Pump Tank: 1000 Gallons; PT 32 Date 7/26/05
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☒ New System ☐ Repair System Type: I II III IV V VI
System Description: Conv 25% Reduction
Repair System Description: LPPBPS
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other

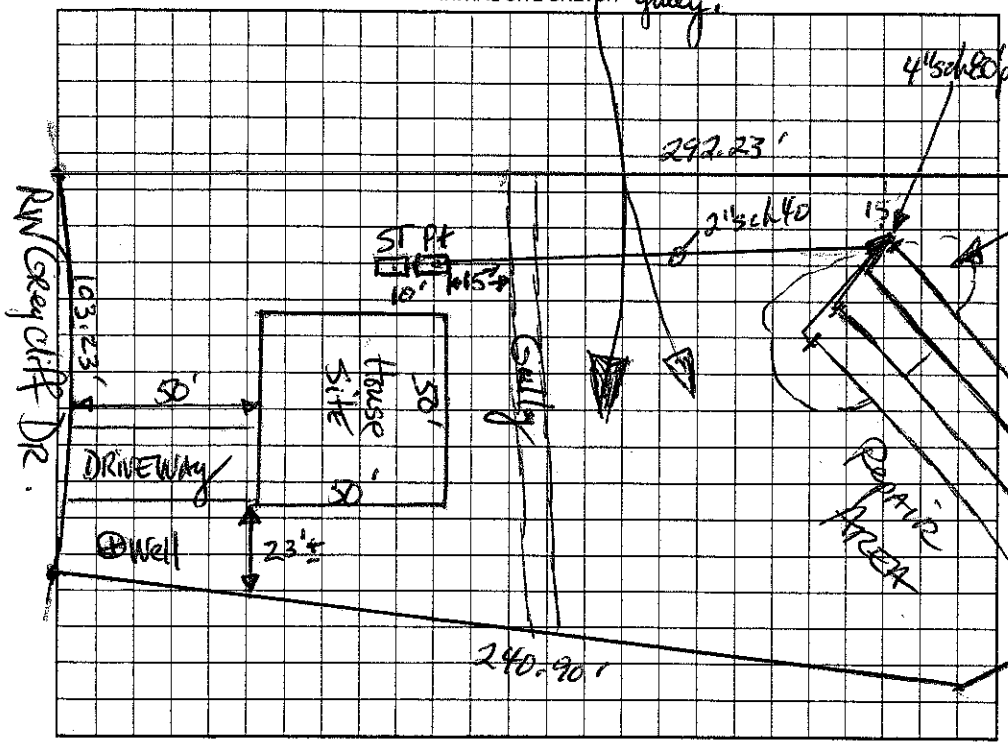
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

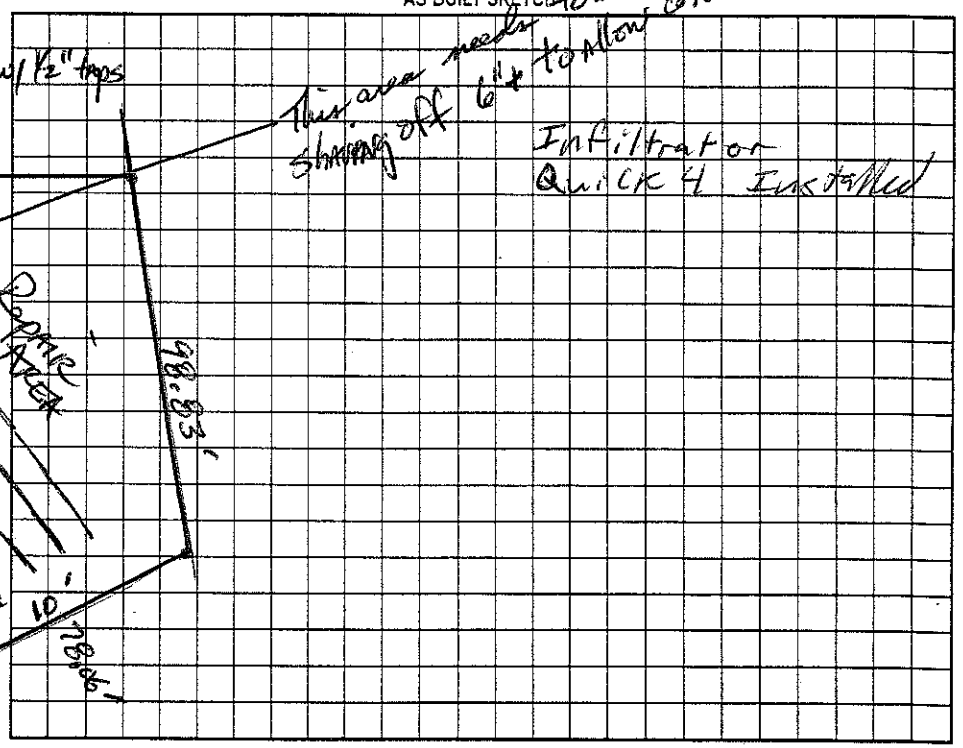
Comments:/Conditions: Gullied area should be properly filled - Do Not bury debris. This should become the low point to drain stormwater. This area needs grading to remove "hump" that will allow stormwater to drain towards gully.

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH to be modified by Lawson



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 8-10-5 Installed by: Corinthian Blders

Improvement Permit by: DA Lawson, RS date 8-5-05 Operation Permit by: RS date 3/6/06

Authorization to Construct by: DA Lawson, RS date 8-10-05 Existing System Inspection by: date

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