IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 375.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 123276 PIN# 4649 17 8464 DATE August 4, 05

OWNER OR CONTRACTOR Phil Schepper Keith Lucas Dev. PHONE: Business _____ Home _____

ADDRESS By 990 Denver, N.C. 28037

LOCATION Fern Hill Rd. (N.) TR Fern Hill Rd. on left just before jct w/ Carlyle Rd.

SUBDIVISION The Ranches BLOCK / SECTION 1 LOT 7 LOT AREA .50Ac SITE CLASS. PS. DESIGN FLOW 360gpd L.T.A.R. N.25

Septic Tank: 1000 Gallons; STB 312 Date 5/14/05

Pump Tank: 1000 Gallons; PT 32 Date 7/11/05

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 4 Square Feet 500/750 Linear Feet 250

No Lines 6 Trench Width 24" max 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPPPBPS

Repair System Description: LPPPBPS

Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 3

[ ] Mobile Home No. Bathrooms ____

[ ] Business No. Employees ____

[ ] Other ____

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

Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions: Remove gravel from old driveway in repair area. Use Rip plow to loosen compacted soil in old driveway. DO NOT Bury Debris IN FORMER Gully OR PERMIT will be Revoked/Suspended!

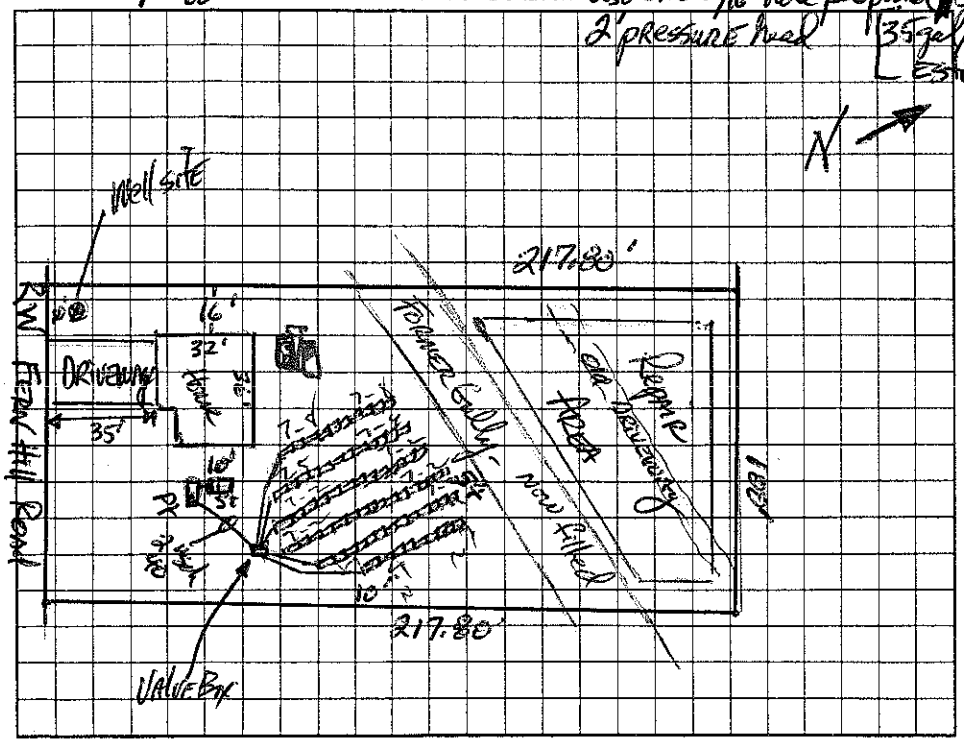
Comments:/Conditions: Sign Tech Fiddan

1"=60'

INITIAL SITE SKETCH Use one 3/16" hole per panel 58 panels total

2' pressure head

35 gal/min @ Approx 20' TDH Estimated pump rate.



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: Doug A. Hendrix date 8/4/05 Installed by: Others Plumbing

Improvement Permit by: _____ date 8-4-05 Operation Permit by: _____ date 12/13/05

Authorization to Construct by: _____ date 8-4-05 Existing System Inspection by: _____ date _____

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