IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 123270 PIN# 4649-17-8589.000 (.003) 4649-27-3400 DATE March 11, 05

OWNER OR CONTRACTOR Kenton Salyer PHONE: Business 704 527-7055 Home

ADDRESS 7031 Idlewild Rd. W. Charlotte, NC 28212

LOCATION North Rd. N. TR Ferd Hill Rd TL Carlyle Rd ~ 200-250' on left

SUBDIVISION The Ranches BLOCK / SECTION LOT 3 LOT AREA .54Ac SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 786 Date 4/13/05
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I II III IV V VI
System Description: Conv. w/ 25% Reduction LPP865
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☑ No initially
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

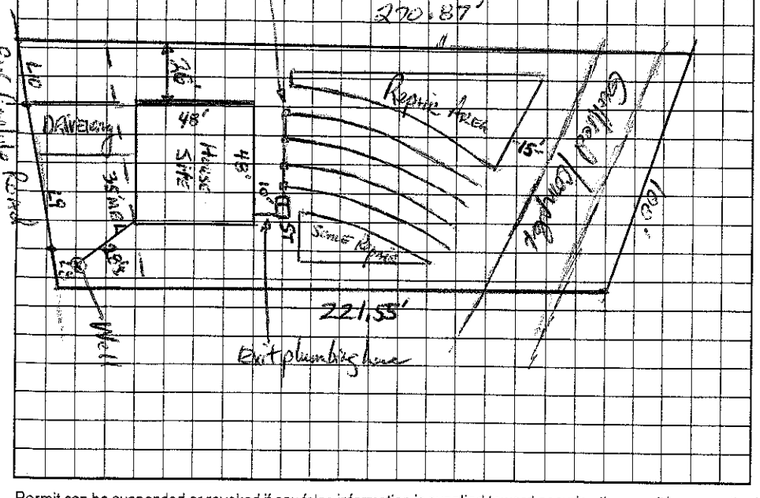
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other

Water Supply: ☑ Individual ☐ Public ☐ Community

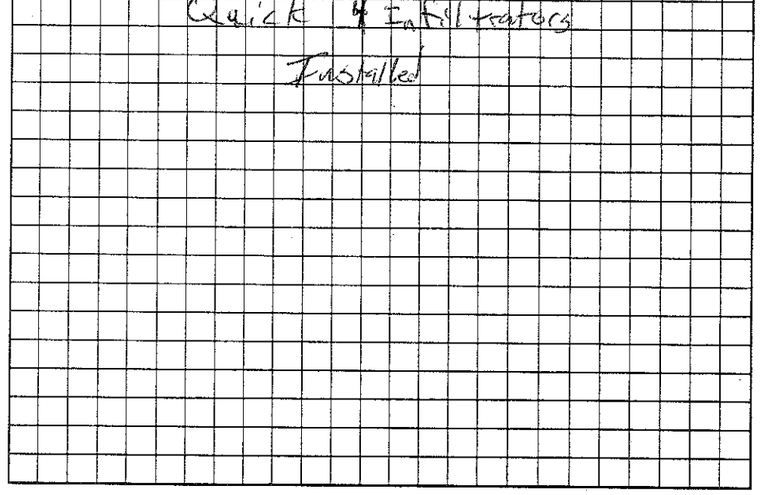
Comments:/Conditions: Builder must construct elevated slab and exit plumbing where shown in order to accomodate the septic system specified on sketch.

Comments:/Conditions:

INITIAL SITE SKETCH 1"=60'



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: Kenton C. Salyer date 3/11/05

Improvement Permit by: DR Hinson, RS date 3-11-05

Authorization to Construct by: DR Hinson, RS date 3-11-05

Installed by: Corinthian Bldrs

Operation Permit by: GM RS date 6/16/05

Existing System Inspection by: date

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