IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093643 PIN# 4649767404 3:00

OWNER OR CONTRACTOR John Blankenship PHONE: Business 664-4873 ext 231 Home (704) 528-4137 DATE 1/17/2001

ADDRESS 108 Sorrell Ln. Troutman, NC 28166

LOCATION Flowerhouse Rd Rankin Hill Rd Thoroughbred Tr Sorrell

SUBDIVISION Palomino Pk BLOCK / SECTION LOT 69 LOT AREA SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 825 Date 12-4-00

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity - Conventional

Repair System Description: Grav/Pump - Pavel Pk

Maintenance Agreement Required: ☐ Yes X No

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

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

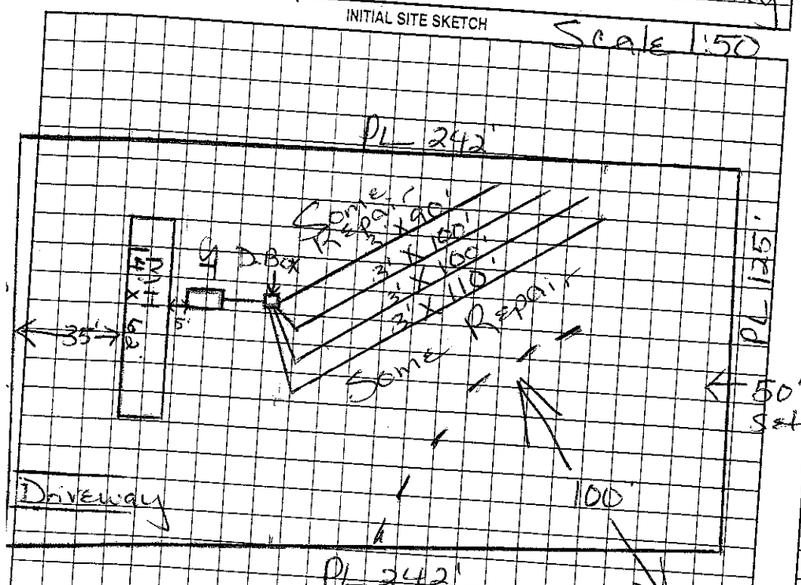
No. Bedrooms 3 No. Bathrooms 1 No. Employees

Water Supply: X Individual Shared ☐ Public ☐ Community

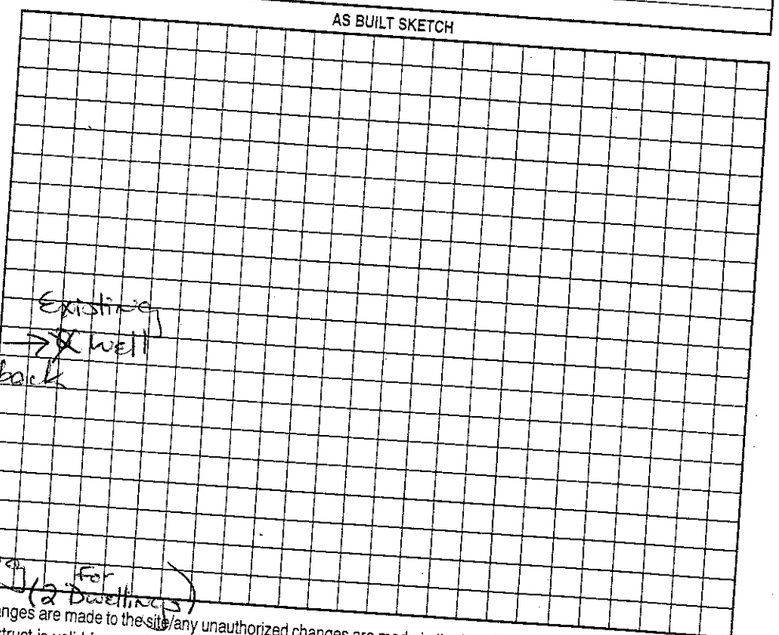
Comments:/Conditions: Keep Septic System at least 10' From PL, 5' From House & 100' From "Shared Well" and 50' From any Other Well

Comments:/Conditions: Installed 4 Conventional lines Filter installed.

INITIAL SITE SKETCH Scale 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 John Blankenship date 1/17/00

Improvement Permit by: Maria H. Dotson RS. date 1/17/2001

Authorization to Construct by: Maria H. Dotson RS date 1/17/2001

Installed by: Rowan Septic

Operation Permit by: Maria H. Dotson RS date 2/6/2001

Existing System Inspection by: _____ date _____

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