IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 AZP | Mooresville Office (704) 660-3625 | PERMIT # 1605 211417

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

PIN # 4649-79-9247

APPLICANT: CHARLIE PAXTON | APPLICANT ADDRESS: 424 RANKIN HILL RD, Troutman

SITE ADDRESS: SAME | PHONE: 704-402-7272 | ALT. PHONE:

SITE DIRECTIONS: 21 N, TL FLOWERHOUSE, TL RANKIN HILL, ON R

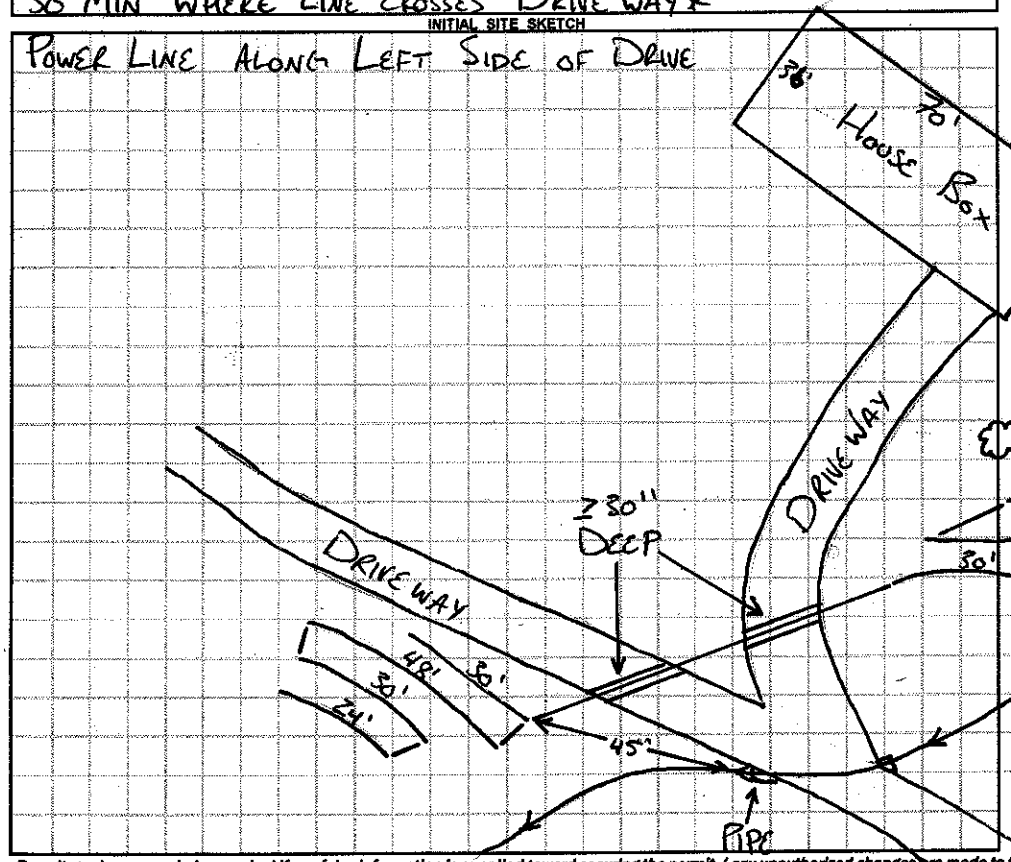
SUBDIVISION: — | SECTION: — | LOT #: — | LOT AREA: 11.7 AC | DESIGN FLOW: 240 | L.T.A.R.: .225

Septic Tank	1000 (gal)	STB	1017	Date	4-6-15	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 2	Water Supply
Pump Tank	(gal)	PT		Date		System Description:	25% REDUCTION	☐ Business	No. Persons	☐ Private
Pump Make		Model		Serial #		Repair System Description:	PM 25% REDUCTION	☐ Other	No. Employees	☐ Public
# Nitrification Fields	1	# Lines	7	Linear Ft:	208'	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☐ Crawl Space	☒ Community
Trench Width	36"	Max. Trench Bottom Depth	16" MAX	Gravel Depth	—		☒ GRAVITY ☐ PRESSURE	☒ Basement w/plumbing		☐ Basement w/o plumbing

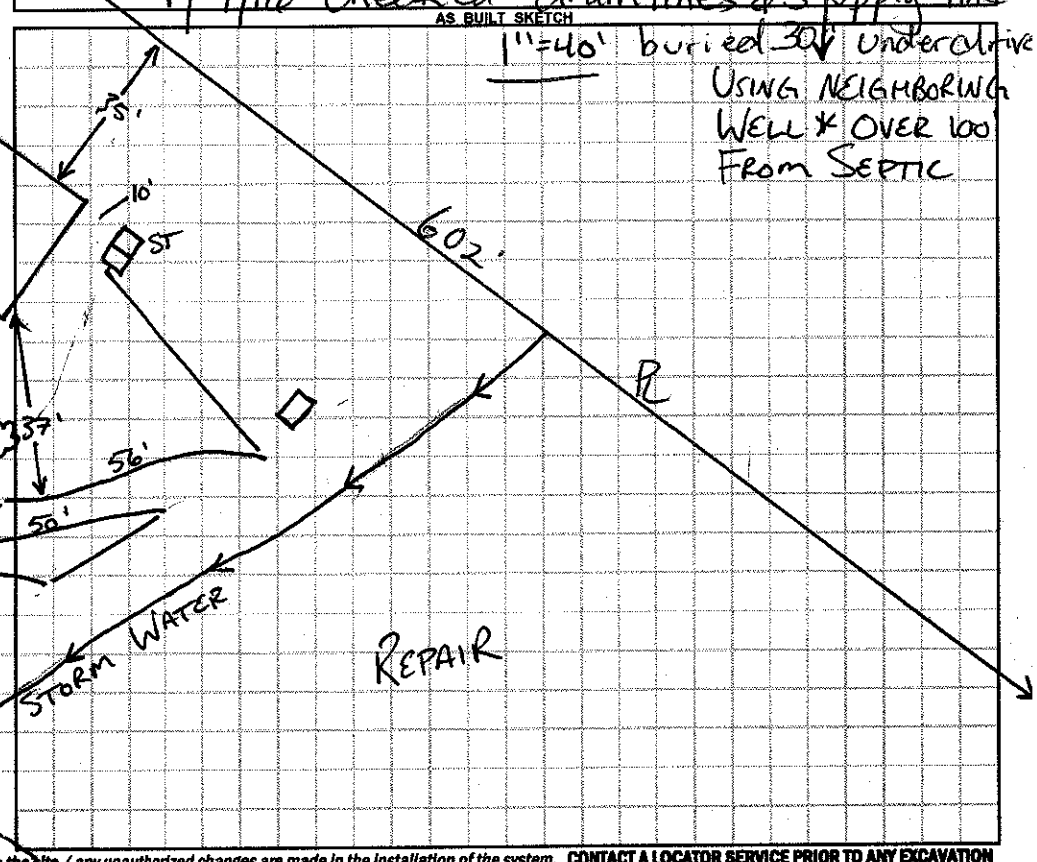
Comments / Conditions: STAY 15' FROM STORM WATER DITCH 16" MAX TRENCH BOTTOM * HOUSE IS UNDER GROUND. GRADE AREA FOR TANK SO THAT IT IS NO DEEPER THAN 36" * 30" MIN WHERE LINE CROSSES DRIVE WAY *

* HOUSE CAN MOVE TO RIGHT ~30' *
CHECKED TANK
12-21-15 BA
1/7/16 Checked drain lines & S supply line

INITIAL SITE SKETCH



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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 7/13/15 | Installed by: STEVE JORDAN

IMPROVEMENT PERMIT by: [signature] APPROVED Date: JUN 27 2015 | OPERATION PERMIT by: [signature] Maine Hill Sanitarian RS Date: 1/7/16

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 7-2-15 | Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK