IREDELL COUNTY HEALTH DEPARTMENT

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

1:30

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

PERMIT # 157790 PIN # 4654-28-7912 DATE 8-24-09

OWNER or APPLICANT CRETIA TREADAWAY PHONE: Business 704-746-7094 ~~Home:~~ CHAD AHP

OWNER or APPLICANT ADDRESS 109 SWAN LAKE RD MVILLE, NC 28115

LOCATION / DIRECTIONS 115 S, TL MIDWAY LAKE RD, TR SWAN LAKE, ON L

SUBDIVISION — BLOCK / SECTION — LOT # 110 LOT AREA .502AC DESIGN FLOW 360 L.T.A.R. .3

Septic Tank 1000 Gallons: STB 1012 Date 5-12-08 ☒ New System ☐ Repair ☐ Expansion System Type (II) III IV V VI

Pump Tank — Gallons: PT — Date —

Pump Make — Model — Serial # —

Nitrification Field No Fields 1 No Lines 4 Linear Feet 300'

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth — ☒ GRAVITY ☐ PRESSURE

System Description: GRAVITY 25% REDUCTION

Repair System Description: LP- PANEL BLOCK

Maintenance Agreement Required ☐ YES ☒ NO INITIALLY

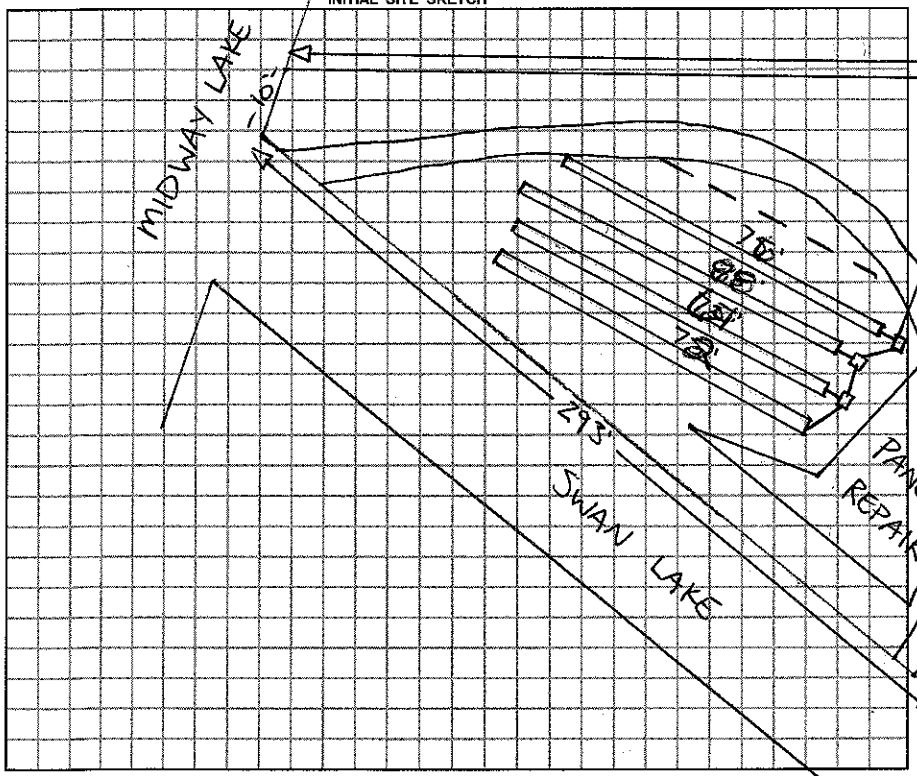
☒ Residence No. Bedrooms 3 ☐ Business No. Persons — ☐ Other No. Employees — ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

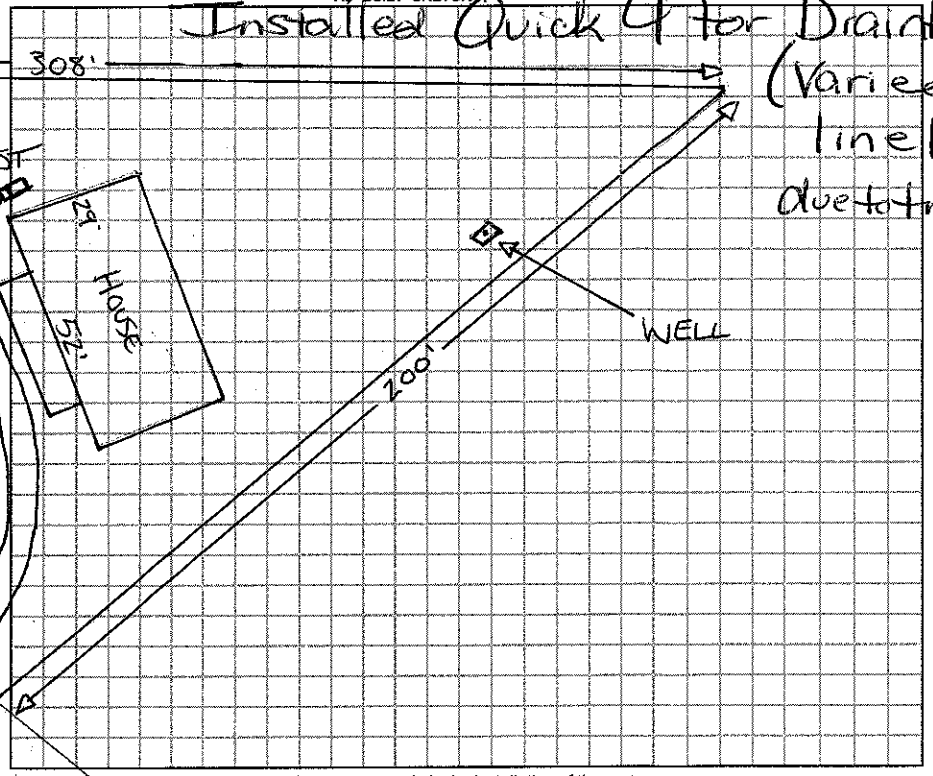
Comments / Conditions: RedFilter in ST

Comments / Conditions 1) MEET ALL REQUIRED SET BACKS 2) IF OLD DRAIN LINE IS HIT, A 24" DAM SHOULD BE PUT ON BOTH SIDES OF NEW LINE 3) OLD TANK MUST BE PUMPED, CRUSHED + FILLED

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.

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

Owner / Applicant Signature: Cretia Treadaway Date 8/25/09

Improvement Permit by: [signature] RS Date 8-24-09

Authorization to Construct by: [signature] RS Date 8-24-09

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Gunter RS

Operation Permit by: [signature] Date: 10/23/09

Existing System Inspected by: — Date: —

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant