EDELL COUNTY HEALTH DEPARTMENT
STATESVILLE 704-878-5305

PROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION

IT# 123781 PIN# 4664-07-0375.017

R OR CONTRACTOR RIDGELINE DEVELOPMENT/EDWARDS CONST PHONE: Business 367-

ESS 17105 NORTH PRIDE SUITE 207-C CORNELIUS NC 28031

TION SHEARERS RD(S) - TL ANNISTON WAY - TR LOGAN - LOT ON L

VISION ANNISTON BLOCK / SECTION 1 LOT 14 LOT AREA .76 AC SITE CLASS.

c Tank: 1000 Gallons; STB 194 Date 6/28/06

Tank: 1800 Gallons; PT 283 Date 7/7/06

Make: GOULDS Model WE1512HH Serial No.

cation Field: No Fields 1 Square Feet 640 Linear Feet 320

nes 5 Trench Width 24" Max Trench Bottom Depth 30" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III

System Description: 28 PANEL OF

Repair System Description: 28 PANEL ON SI

Maintenance Agreement Required: ☑ Yes ☐ No

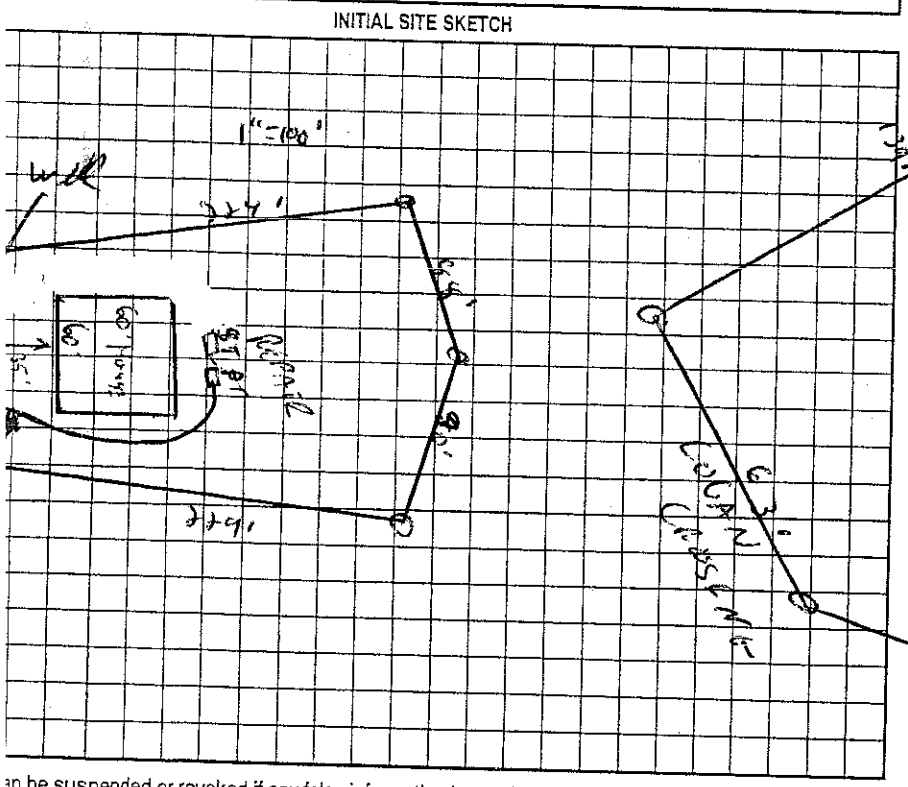
☐ Slab ☑ Gra

ents:/Conditions:

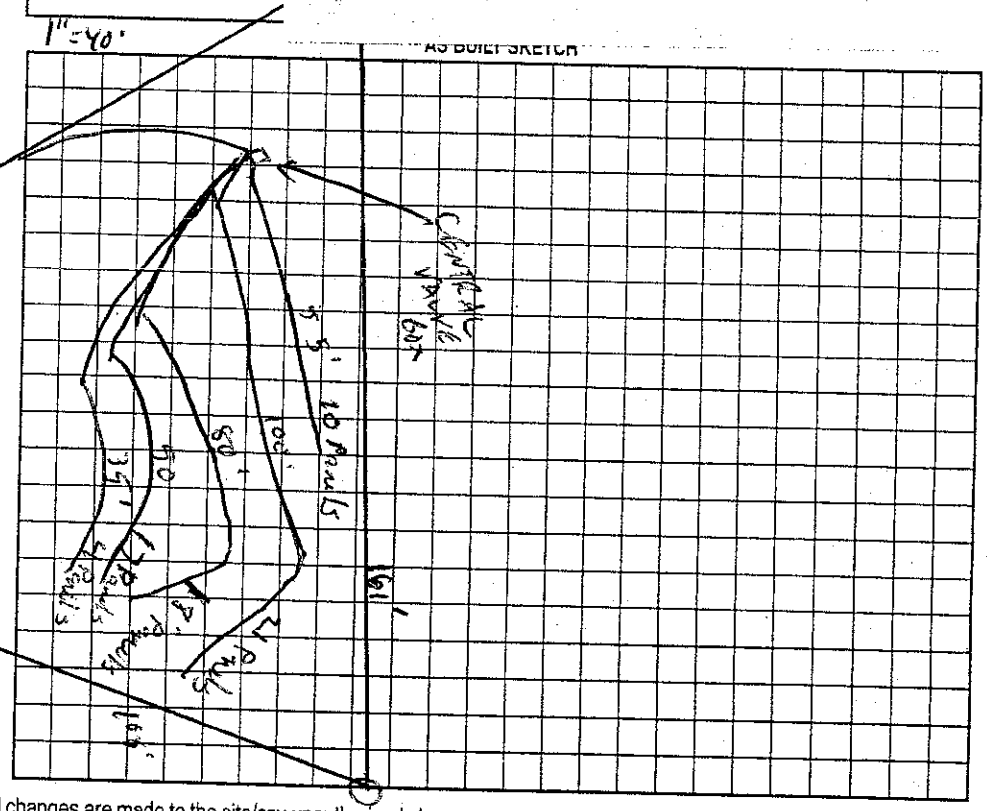
Comments:/Conditions:

	Date	Initials
Drain Lines Checked	8/21	GM
Tanks Checked	8/21	GM
Pressure Manifold or Valve Box Checked	8/21	GM
Pressure Head Set	9/26	WS
Electrical Checked		
Floats Set	9/26	WS
Alarm Checked	9/26	WS
Maintenance Contract Y / N		

INITIAL SITE SKETCH



AS BUILT SKETCH



an 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 ith 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.

Dori Tomaselli date 5-17-05

nent Permit by: [signature] date 5/5/05

tion to Construct by: Wesley Sparks R.S. date 11/8/05

Installed by: Marty Tucker

Operation Permit by: date

Existing System Inspection by: date

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