IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 123282 PIN# 4664670278.015 4664-57-3704 DATE 5/5/05

OWNER OR CONTRACTOR RIDGELINE DEVELOPMENT / WINSOR PHONE (Business) 362-5007 Home

ADDRESS 17105 KRATON DR. SUITE 207-C CORNELIUS NC 28031

LOCATION SHEARERS RD (S) - TL ANNISTON WAY - TL LOGAN CROSSING - LOT ON LT - SEPTIC ON RT

SUBDIVISION ANNISTON BLOCK / SECTION 1 LOT 15-15A LOT AREA .77AC SITE CLASS. A1 DESIGN FLOW 450GPD L.T.A.R. 2.250.00/Ac

Septic Tank: 1000 Gallons; STB 194 Date 9-10-07

Pump Tank: 1000 Gallons; PT 283 Date 2-20-08

Pump Make: Myers Model ME150-21 Serial No.

Nitrification Field: No Fields 1 Square Feet 330 Linear Feet 365

No Lines 4 Trench Width 24" Max Trench Bottom Depth 30" Gravel Depth N/A

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

System Description: CP PANEL (OFFSET)

Repair System Description: CPP (SAME)

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

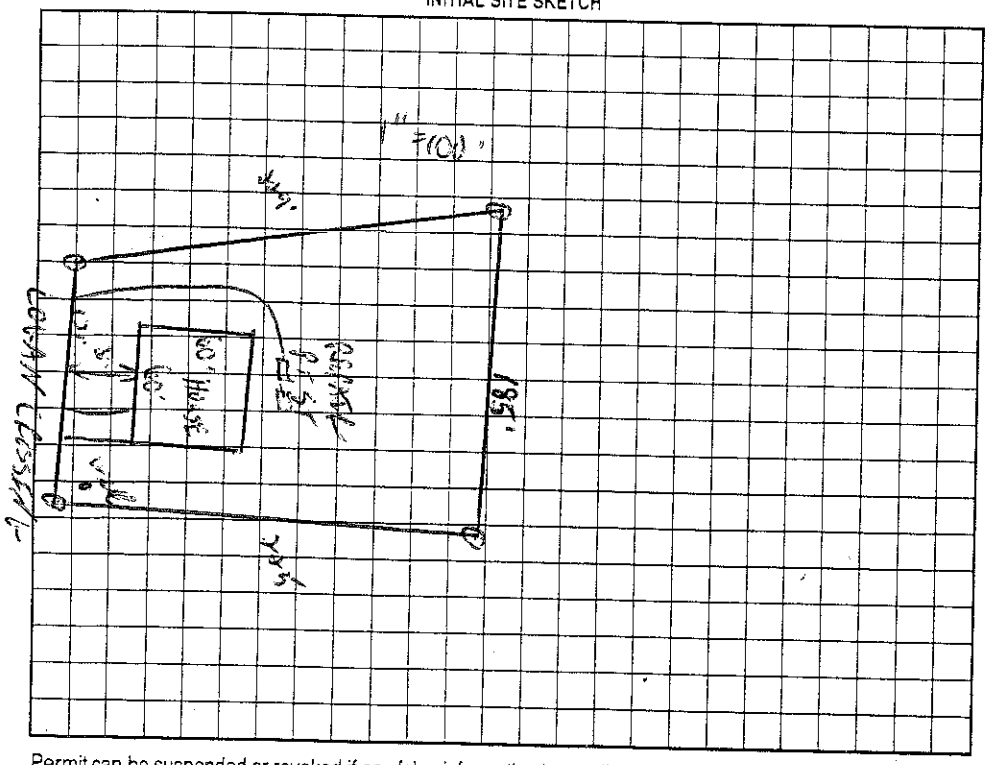
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

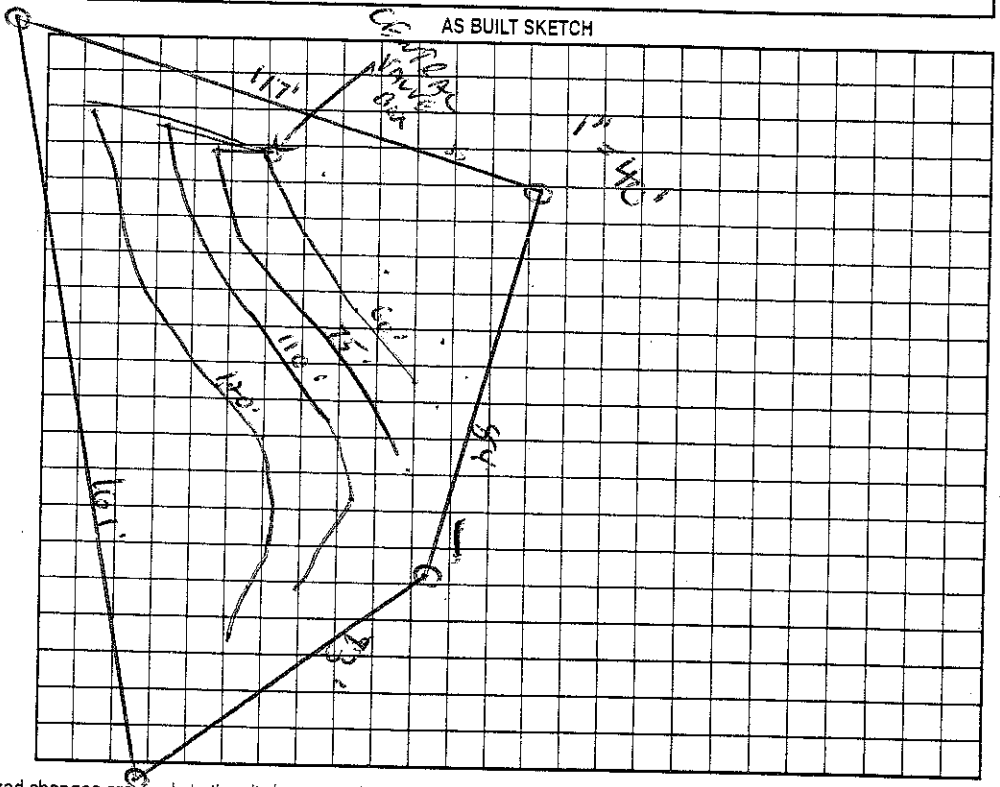
Comments:/Conditions: 3/16" hole drilled 4/25/08 Checked 2" supply line from PT to Rd.

Comments:/Conditions: 4/24/08 Checked lines & tanks

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 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: [signature] date 5-17-05 Installed by: Stanley Septic

Improvement Permit by: [signature] RS date 5/5/05 Operation Permit by: [signature] date 6-9-08

Authorization to Construct by: [signature] RS date 12/5/07 Existing System Inspection by: [signature] date

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