Alan Kastle Construction 892-3636 / Buddy 828 312-8121 1:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 088124 PIN# 4664591420 DATE 3/22/2000

OWNER OR CONTRACTOR Thomas Kerr PHONE: Business _____ Home 895-1684 Karen

ADDRESS P.O. Box 1631 Cornelius NC 28031

LOCATION Hwy 115 S to Presbyterian Cross Shearer Rd 2nd lot on left

SUBDIVISION Belle Glade BLOCK / SECTION _____ LOT 21 LOT AREA .49 Acre SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. _____

Septic Tank: 1000 Gallons; STB 312 Date 3-5-00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4 at 100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: Pump/Grav. - 25% Reduction
Maintenance Agreement Required: ☐ Yes ☒ No (NEW)
Gravel Depth N/A

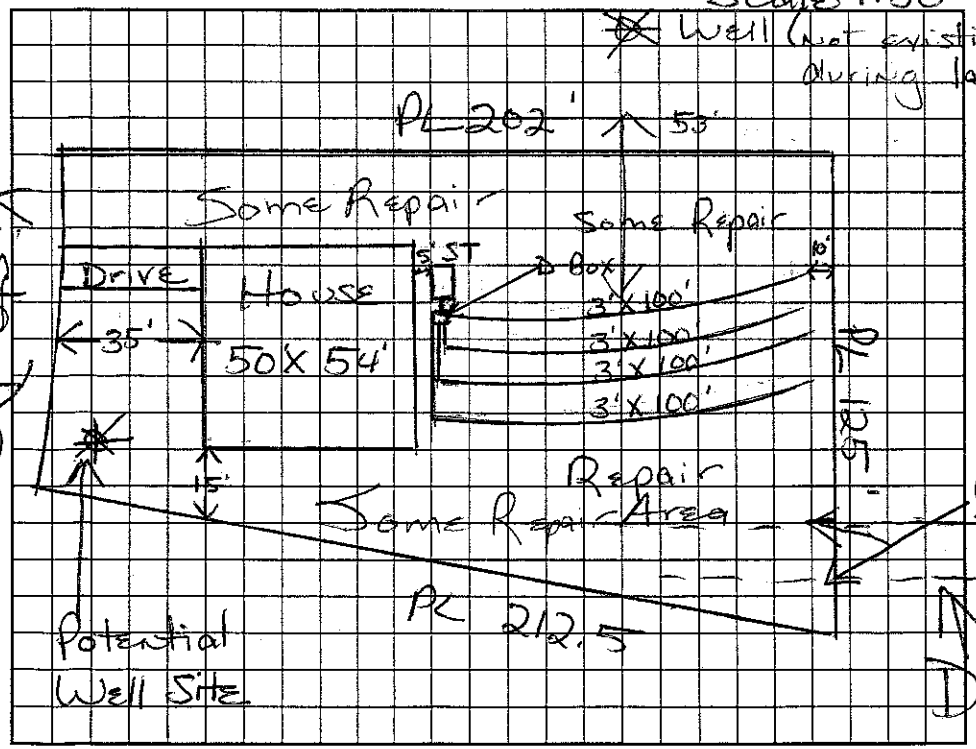
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

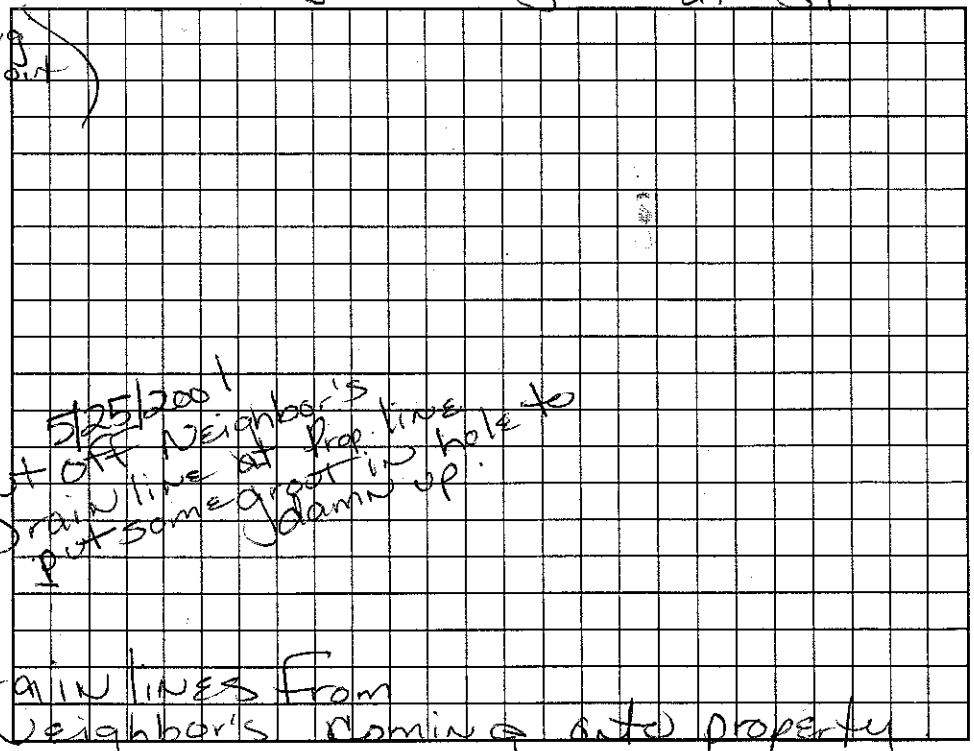
Comments:/Conditions: Keep Septic System 10' From PL & 5' From House.
Note to Installer: Install drainlines on contour - can also use 5-80' lines

Comments:/Conditions: Polylok Filter installed, Checked tank Checked lines.
Builder says plumbing will be plumbed out at ST

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 plan 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: Karen Bass date 3-24-00 Installed by: Buddy Chaney's

Improvement Permit by: Maria H. Dotson RS date 3/22/2000 Operation Permit by: Maria H. Dotson RS date 5/25/2001

Authorization to Construct by: Maria H. Dotson RS date 3/22/2000 Existing System Inspection by: _____ date _____

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