IREDELL COUNTY HEALTH DEPARTMENT

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

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

$90

PERMIT# 142138 PIN# 4666466697997.069 46664-66-8833 DATE 3/6/2008

OWNER OR APPLICANT Anniston, LLC PHONE: Business _____ Home _____

ADDRESS 17825 Statesville Rd. suite 112 Cornelius, NC 28031

LOCATION Sheeres Rd South, TL Anniston way, TR Burnell, on right near Cul-de-Sac

SUBDIVISION Anniston BLOCK / SECTION 2 LOT 69 LOT AREA 1.03ac ± 13,962SF SITE CLASS PSSFE DESIGN FLOW 600gal/day T.A.R. 0.3

Septic Tank: 1500 Gallons; STB 390 Date 12/16/07

Pump Tank: 1500 Gallons; PT 353 Date 4/7/07

Pump Make: Zoeller Model F191 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 333'

No Lines 5 Trench Width 36"/24" Max Trench Bottom Depth 36" Gravel Depth NA ☐ Gravity ☒ Pressure

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

System Description: LPPPBPS on SFE-69

Repair System Description: same as above

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 5 No. Persons ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

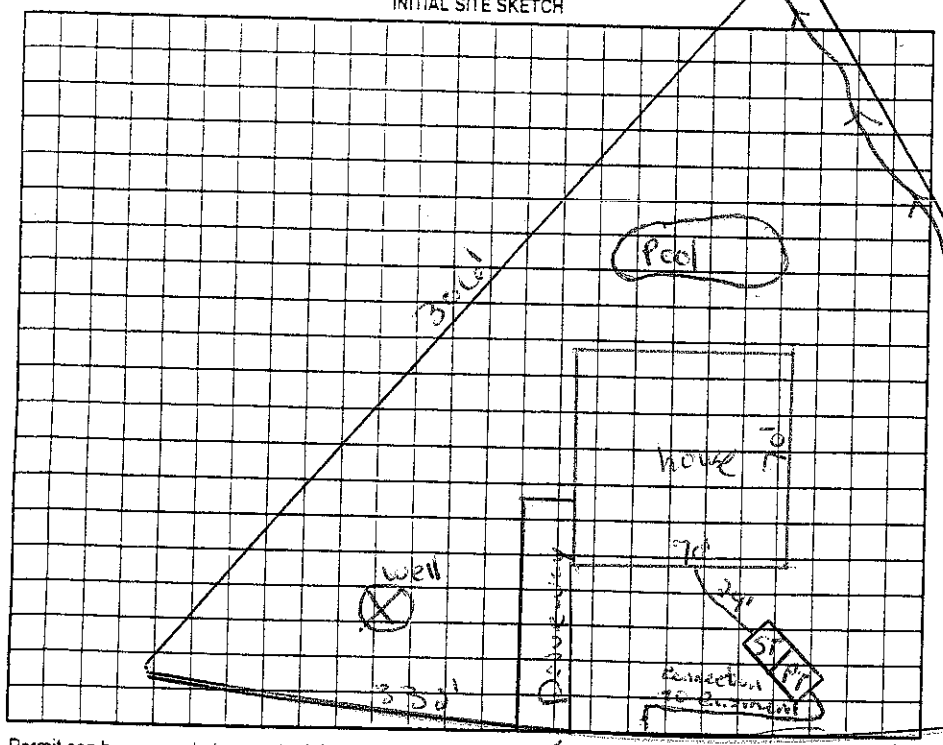
Comments:/Conditions:

*per plan specs maintain all setback's & follow contour

*must install grinder pump in basement to pump to 1st floor sewer

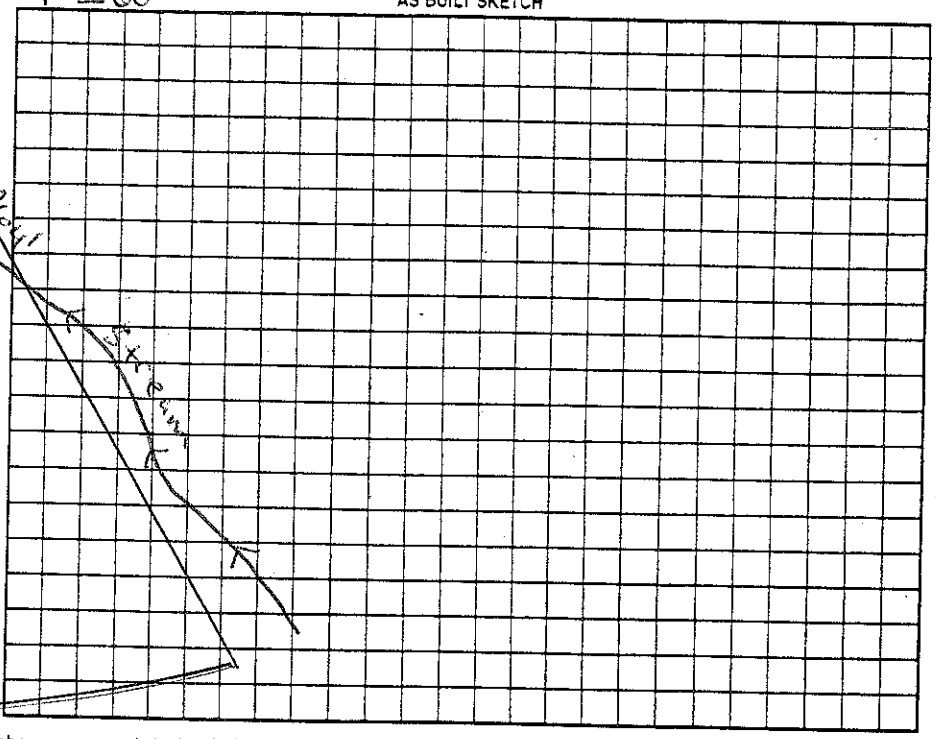
Comments:/Conditions:

INITIAL SITE SKETCH



1" = 60'

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: _____ date _____

Improvement Permit by: Randy Moore date 3/6/08

Authorization to Construct by: Randy Moore date 3/6/08

Installed by: J Amie O'Donnell

Operation Permit by: _____ date 3-17-08

Existing System Inspection by: _____ date _____

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