# IREDELL COUNTY HEALTH DEPARTMENT

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

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

315.00

PERMIT# 136816 PIN# 4664 67 8995 .052 4664-78-3202 DATE Sept 29, 2006

OWNER OR APPLICANT Anniston II LLC / BLUTO HOMES PHONE: Business Home

ADDRESS 17824 Lakeside Blvd Suite 112 Cornelius, N.C. 28031

LOCATION Shearers Rd. (S) TL Anniston Way X Creek TL Timberside Dr 2nd lot on right

SUBDIVISION Anniston BLOCK / SECTION 2 LOT 52 LOT AREA .77Ac SITE CLASS. PS DESIGN FLOW 600gpd L.T.A.R. .3

Septic Tank: 1500 * Gallons: STB 339 Date 3/20/07

Pump Tank: 1500 * Gallons; PT 47 Date 4/21/07

Pump Make: Little Giant Model 9EH Serial No.

Nitrification Field: No Fields 1 Square Feet 1125* Linear Feet 325 *

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

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

System Description: LPPBPS

Repair System Description: LPPBPS

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

Comments:/Conditions:

INITIAL SITE SKETCH

SEE PLAN from Rollins Soil & Env. Services

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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Permit with plat valid without expiration. ☐ Improvement Permit with site plan valid for sixty months ☒

Signed: Dori Oakley

Improvement Permit by: date 10-10-06

Authorization to Construct by: date 9-29-06

date 1-11-07

Installed by: Larry Tucker

Operation Permit by: Wesley Sparks R.S. date 6/5/08

Existing System Inspection by: date

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