IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 144954 PIN# 4667 84 9509 DATE 1/11/08

OWNER OR APPLICANT DARREN P. HILL PHONE: Business 704-902-1305 Home

ADDRESS 110 LITE WOOD LN. MOORESVILLE, NC 28115

LOCATION N MAIN ST. TR KENNERLY AVE ON (L) JUST BEFORE GRAVEL STARTS.

SUBDIVISION JAKENNERLY BLOCK / SECTION TRACT 1 LOT 125-130 LOT AREA .757 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 622-900 Date 10-14-07

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 4@75' Trench Width 3' Max Trench Bottom Depth 36+ Gravel Depth No

[X] New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: CRAW - 25% REDUCTION

Repair System Description: PRES - 16" PPBPS

Maintenance Agreement Required: ☐ Yes [X] No

[X] Gravity ☐ Pressure

[X] House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Persons No. Employees

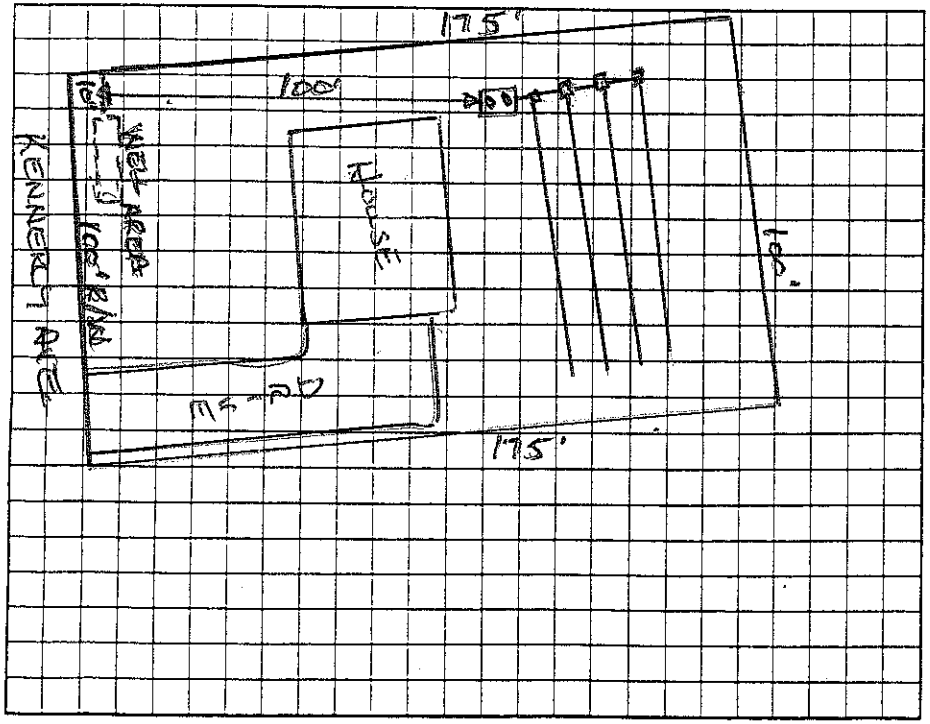
Water Supply: [X] Individual ☐ Public ☐ Community

☐ Slab ☐ Crawl Space [X] Basement w/plumbing ☐ Basement wo/plumbing

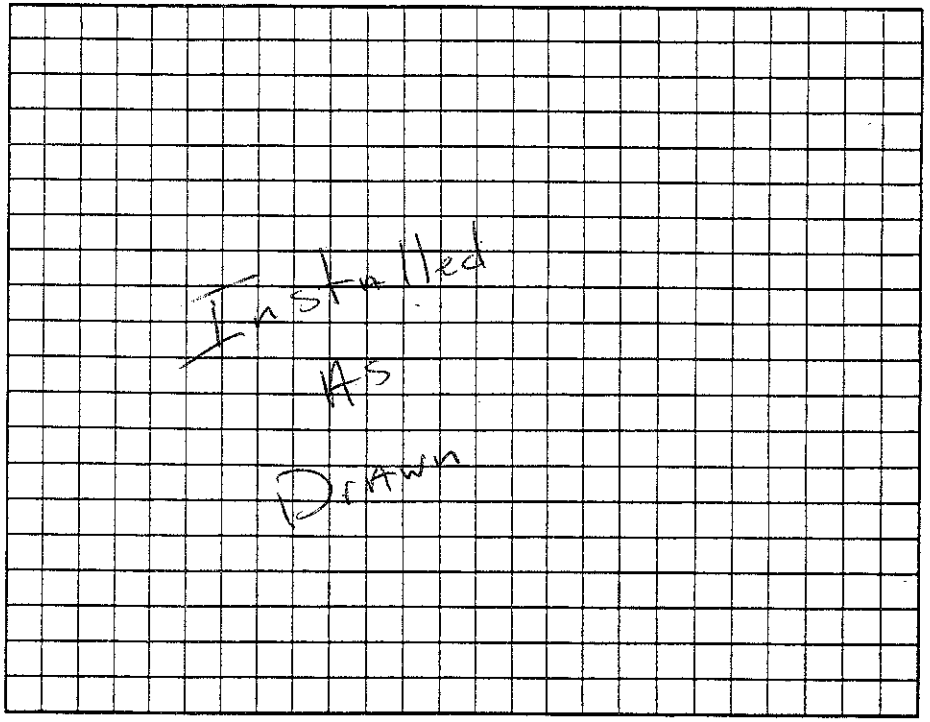
Comments:/Conditions: IF OLD DRAINFIELD ENCOUNTERED - REMOVE 5' OF SOIL BELOW (DOWNSLOPE) AND FILL + COMPACT WITH FRESH SOIL - DIST BOX MAY BE USED

Comments:/Conditions:

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

Signed: [signature] date 1/11/08

Improvement Permit by: [signature] date 1/11/08

Authorization to Construct by: [signature] date 1/14/08

Installed by: Chris Roseman

Operation Permit by: [signature] date JAN-25-08

Existing System Inspection by: date

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