...DELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 8170 7 PIN# 4752822689 DATE June 21 99

OWNER OR CONTRACTOR Kings Forest PHONE: Business 7045326527 Home

ADDRESS 5551 Monroe Rd Charlotte

LOCATION Lot 32 Lansdowne Barbara Rd on Left aft E. Lin Rd.

SUBDIVISION Lansdowne BLOCK / SECTION LOT 32 LOT AREA .67 SITE CLASS. 5 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 798 Date 2-12 99
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, ☒ III, IV, V, VI
System Description: Conv. Conv
Repair System Description: Sam 25% Reduction
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home 4W ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

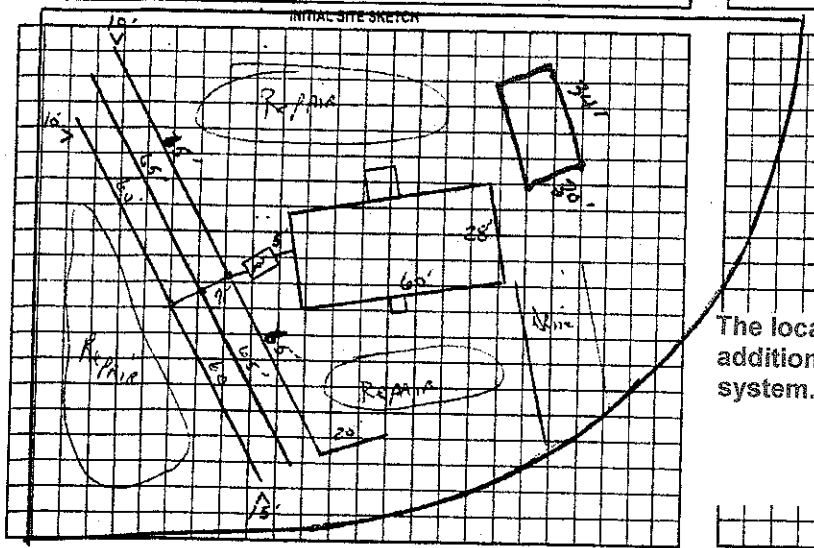
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: Install Risers on each TANK
3 Drop Boxes

Comments/Conditions

INITIAL SITE SKETCH



AS BUILT SKETCH

The location of the proposed Detached garage addition does not appear to impact the existing septic system. **NOTE:

REHS
Date: 8 Apr 2011
ICHD-Environmental Health Division

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 6/21/99 Installed by: Dellinger Grading

Improvement Permit by: [signature] date 6-21-99 Operation Permit by: [signature] date 7-27-99

Authorization to Construct by: [signature] date 6-21-99 Existing System Inspection by: date

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