See permit # 164245 attached for outbuilding addition.

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (O) MOORESVILLE 704-664-5281

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

PERMIT# 145487 PIN# 4704-58-6331 DATE 17 October 07

OWNER OR APPLICANT Patrick Robinson PHONE: Business _____ Home 704-929-6639

ADDRESS 159 Twitty Ln. Statesville, NC.

LOCATION Old Mocksville Rd From I-40 - TR Brady Circle - 4th lot on Rt.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.217 SITE CLASS: PS DESIGN FLOW 360 L.T.A.R. 0.3g/Ft²/day

Septic Tank: ~~1000~~ 1500 Gallons; STB 1014 Date 8-5-2010

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

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

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☑ Gravity ☐ Pressure

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

No. Bedrooms 3 No. Persons _____ No. Employees _____

Water Supply: ☐ Individual ☒ Public ☐ Community

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

Comments:/Conditions:

Follow contour

Room Setbacks

Comments:/Conditions: SEPTIC TANK WITH RISER INSTALLED USING "POLYLOK" FILTER

INITIAL SITE SKETCH

Please see Attached layout.

AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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 ~~without plat~~ ☐ 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 10/18/07

Improvement Permit by: _____, R.S. date 17 Oct. 07

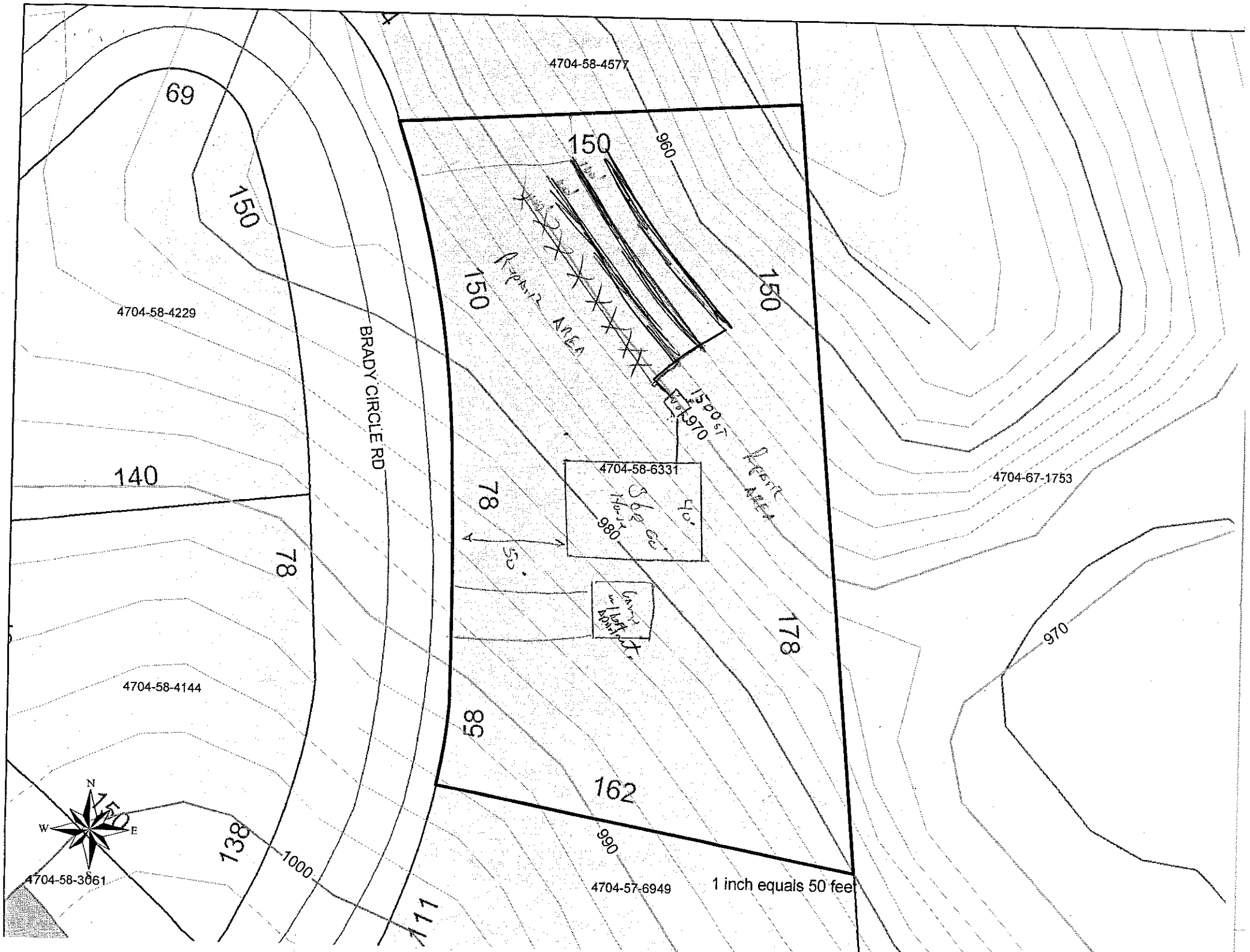
Authorization to Construct by: _____, R.S. date 17 Oct. 07

Installed by: PIEDMONT SEPTIC TANK

Operation Permit by: STEVE HEDRICK date Dec 9, 2010

Existing System Inspection by: _____ date _____

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


4704-58-4577
69
150
960
150
150
150
4704-58-4229
BRADY CIRCLE RD
Repair AREA
1500 ST
970
Repair AREA
4704-58-6331
140
78
980
50'
50'
4704-67-1753
78
178
970
4704-58-4144
58
162
990
N
W
E
150
138
1000
4704-58-3661
4704-57-6949
1 inch equals 50 feet