213722 140 Alexander Knoll Dr.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# ~~R08-359~~ 143595 PIN# 4705388280 DATE 16 July 07

OWNER OR APPLICANT Heritage Builders Co PHONE: Business 704-528-6644 Home 704-902-4680

ADDRESS 120 Hickory Point Court Statesville, N.C.

LOCATION Old Mtn. Rd. Turn into Alexander Knolls - Lot # 57

SUBDIVISION Alexander Knoll BLOCK / SECTION B LOT 57 LOT AREA 0.727 Ac. SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. 0.3/.77/0

Septic Tank: 1000g Gallons; STB 1012-1000 Date 5-14-15

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 5 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

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons _____

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☑ Public ☐ Community

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

Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH

See Attached Site plan

AS BUILT SKETCH

2nd Pump Tank Yellow Tuf-Tite Trenches installed Quick 4 Chambers installed

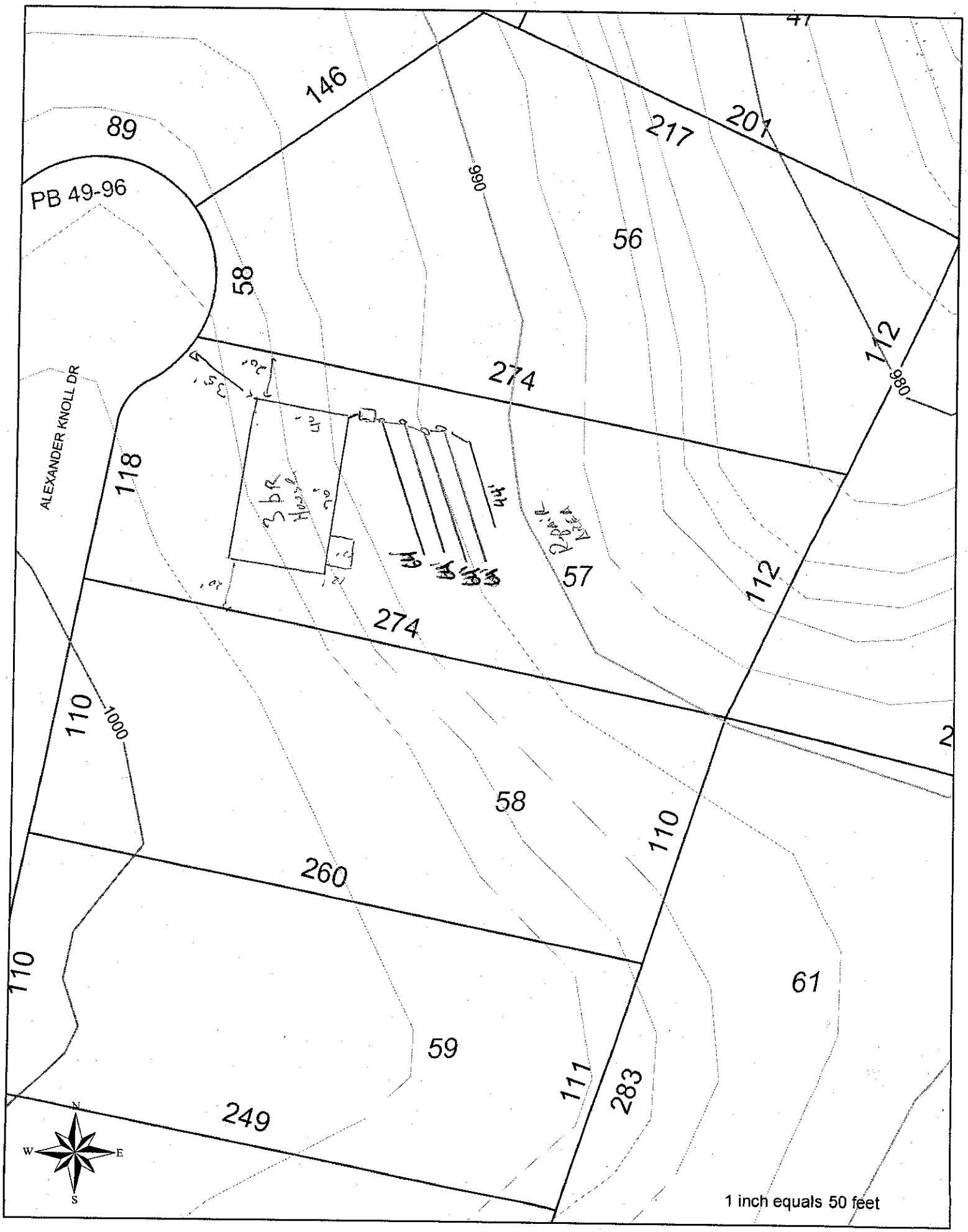
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. ☐ Improvement Permit with site plan 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 7-16-07 Installed by: Tommy Frye

Improvement Permit by: _____, R.S. date 16 July 07 Operation Permit by: _____ date 12-8-15

Authorization to Construct by: _____, R.S. date 16 July 07 Existing System Inspection by: _____ date _____

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


146
89
PB 49-96
217
201
990
56
58
112
980
274
ALEXANDER KNOLL DR
118
3 br
House
57
112
274
110
1000
58
110
260
110
61
59
111
283
249
N
W
E
S
1 inch equals 50 feet