IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 107726 PIN# 4906-65-4723 DATE 7/29/02

OWNER OR CONTRACTOR Franklin Robertson PHONE: Business — Home (704)585-2735

ADDRESS ~~110 Broomsage Lane~~ 321 County Line Road Stony Point NC, 28678

LOCATION 115 N, on Scotts Creek Rd, on Broomsage Lane lot on Right

SUBDIVISION Broomsage BLOCK / SECTION ① LOT 6 LOT AREA .487 Ac. SITE CLASS. 5 DESIGN FLOW 480 L.T.A.R. .30

Septic Tank: 1,000 Gallons; STB 1007 Date 3-3-03

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth NA

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity 25% Redu.

Repair System Description: Pump, 50% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 4 No. Bathrooms 2½ No. Employees ____

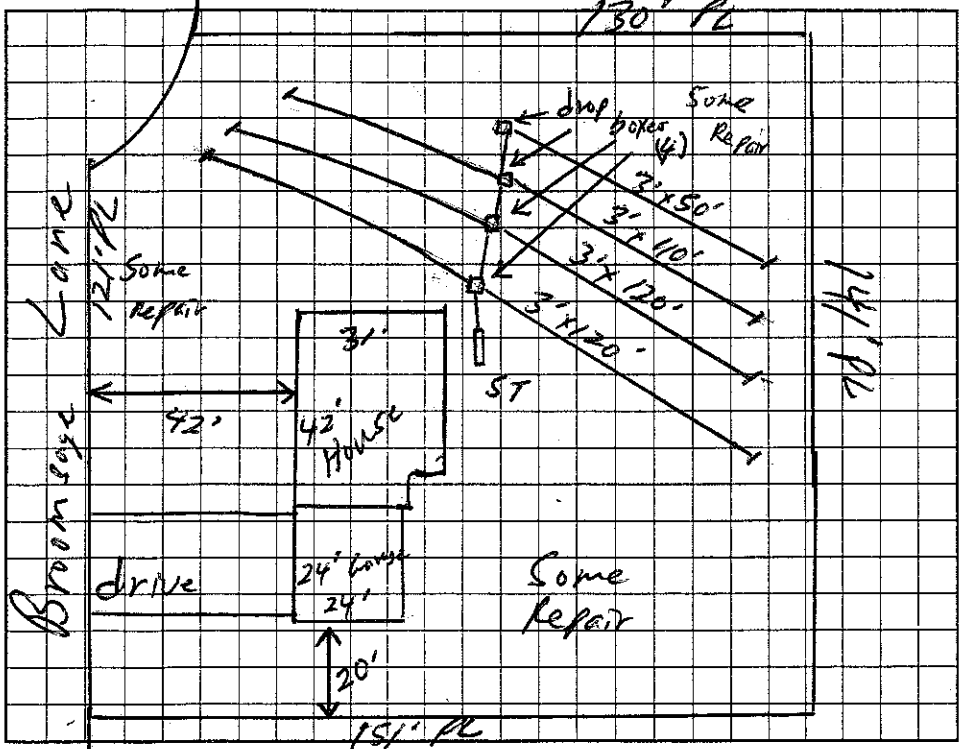
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: ① Install lines on contour @ use 25% Reduction System

Comments/Conditions:
- Installed 64 Infiltrator Chambers
- Installed poly lok filter + ST. Marker

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Shown per 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 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: Robert W. Robertson date 7/29/02

Improvement Permit by: William O. Johnson date 7/29/02

Authorization to Construct by: William O. Johnson date 7/29/02

Installed by: [redacted] Tommy Cothren + Son

Operation Permit by: William O. Johnson date 4/23/02

Existing System Inspection by: ____ date ____

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