IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT REPLACES PREVIOUS O.P. ISSUED 1-27-2005

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

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

PERMIT# 125418 PIN# ~~4709-64-8842~~ 4709-64-5891 DATE 8-3-05

OWNER OR CONTRACTOR THOMAS & RHONDA ROCCA PHONE: Business 704-876-0073 Home 704-872-0763

ADDRESS 189 PISGAH RIDGE DR HIDDENITE NC 28636

LOCATION HILL FARM ROAD TO PISGAH RIDGE CIRCLE, 1ST DRIVE ON LEFT 0.2 MILES, BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 5.527 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB 1012 Date 7-17-04

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet EXISTING

No Lines EXISTING Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms _____

☐ Business No. Employees _____

☐ Other _____

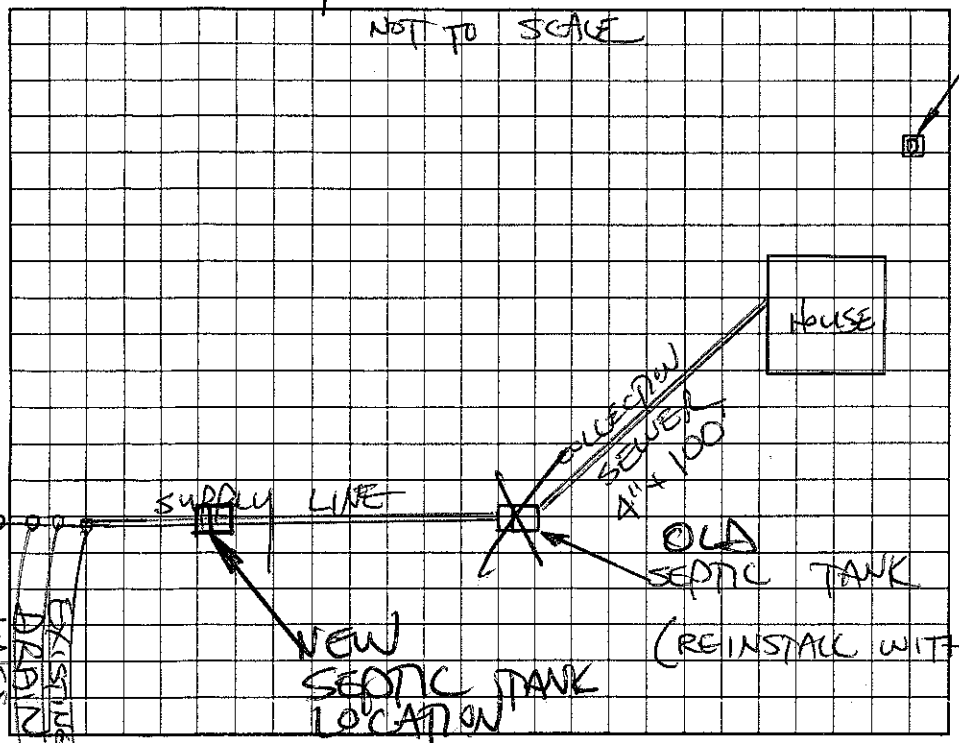
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Public
☐ Community
WELL

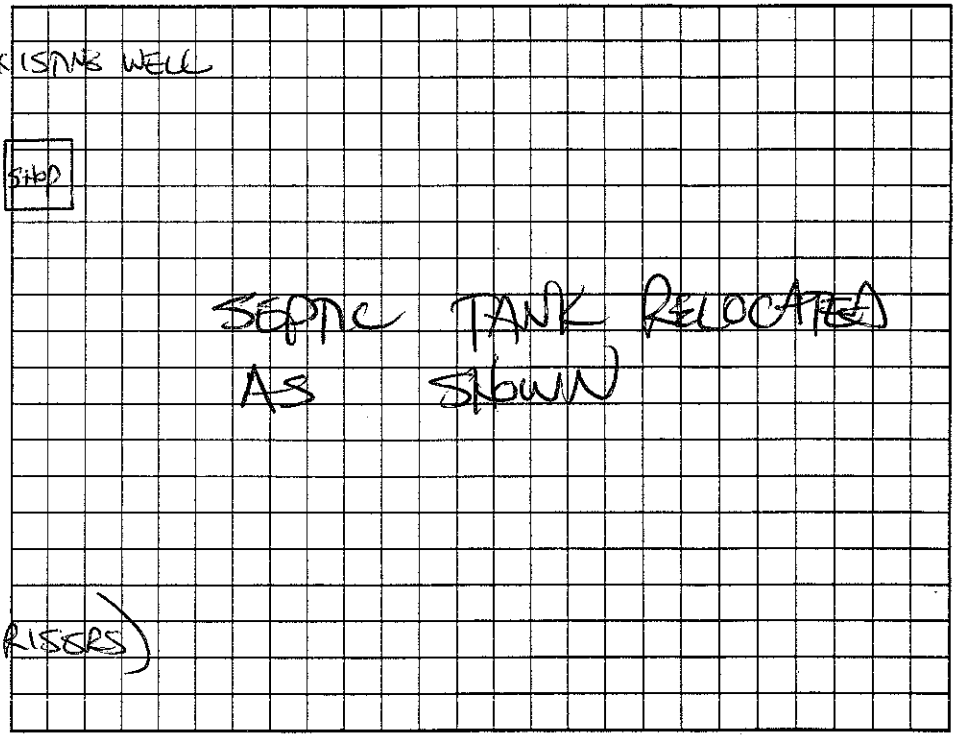
Comments:/Conditions: ① RELOCATE EXISTING SEPTIC TANK TO LOCATION & DEPTH THAT WILL MEET PLUMBING CODE FOR FALL ON COLLECTION SEWER ② LOWER SUPPLY LINE TO DRAINFIELD AS NEEDED -

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FITTINGS

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

Signed: Rhonda Rocca date 8-3-05 Installed by: C & S GRADING

Improvement Permit by: STEVE HEDRICK date 8-3-05 Operation Permit by: STEVE HEDRICK date 8-22-05

Authorization to Construct by: STEVE HEDRICK date 8-3-05 Existing System Inspection by: _____ date _____

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