IREDELL COUNTY HEALTH DEPARTMENT

CI LANCE LINGLE 704-902-4111

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

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

PERMIT# 112828 PIN# ~~4711-65-2851.27~~ 4711-66-1432 DATE 08/04/03

OWNER OR CONTRACTOR D+D ENTERPRISES PHONE: Business 704-528-6192 Home 704-363-2634

ADDRESS P.O. BOX 5602 STATESVILLE, NC 28677

LOCATION BUFFALO SHOALS RD., (L) PINEVILLE RD, (R) BRAXTON DR., ~ SIXTH LOT ON RIGHT.

SUBDIVISION PINEVILLE RD EST, BLOCK / SECTION ____ LOT 2 (15) LOT AREA ~0.70 ACRES SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons; STB 312 Date 1-11-04

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ to 1,200 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 50% REDUCTION, LOW PRESS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

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

Water Supply: ☒ Individual ☐ Public ☐ Community WELL

Comments:/Conditions: (1) WELL MUST BE 100'+ FROM ANY PART OF SEPTIC (15A NCAC 18A .1956 (6)(9)).

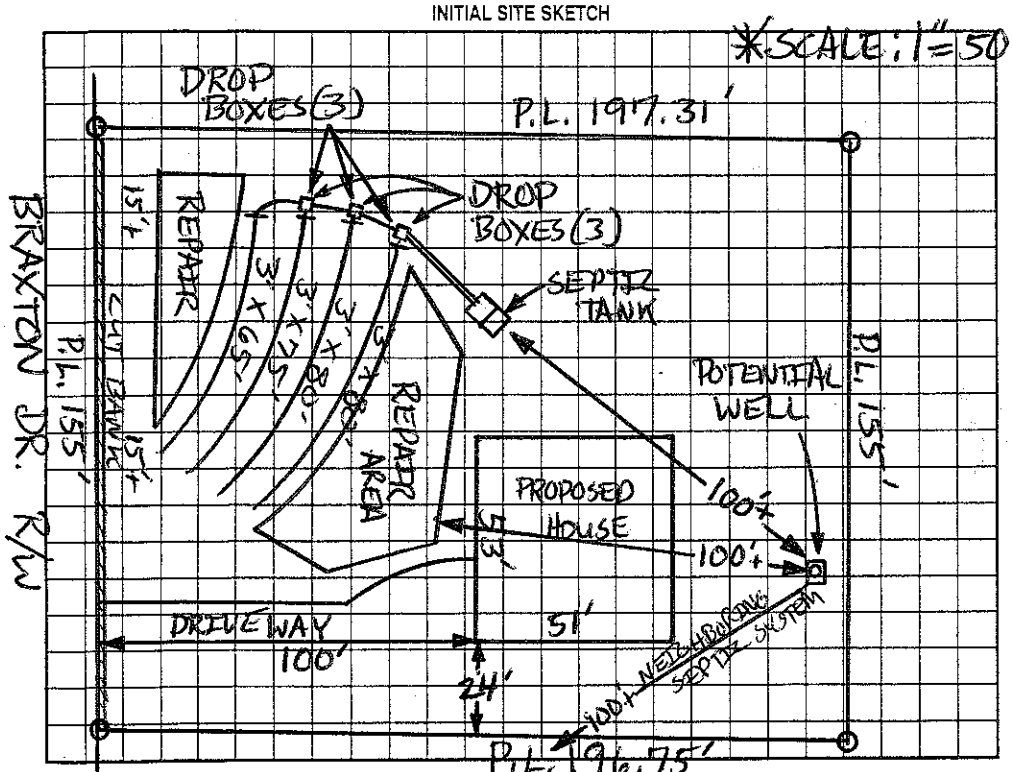
Comments:/Conditions: ✓ 2" = 80' ZABEL FILTER & PISTONS

✓ 1½" = 80'

✓ 1" = 80' STATE RULES ALLOWS ¼" PER LD' OF FALL

~~5" = 70'~~

INITIAL SITE SKETCH



AS BUILT SKETCH

60' ± 1" PVC, FILLED THE LINE ABOVE TOP WITH WATER, OK 5-6-04

INSTALLED DYDUX WET SOIL CONDITIONER

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 ____

Improvement Permit by: Patrick Mitchell date 08/04/03

Authorization to Construct by: STEVE HEDRICK date 11/20/03

Installed by: LINGLE SEPTIC

Operation Permit by: [signature] date 5-6-04

Existing System Inspection by: ____ date ____

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