IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 115165 PIN# 4712-97-5226 (PART OF) 6676 DATE 9-4-03

OWNER OR CONTRACTOR DAVID M. SORENSEN PHONE; Business 704-581-7667 Home 704-895-6780

ADDRESS 19817 CHURCH ST, CORNELIUS NC. 28031

LOCATION BUFFALO SHOALS ROAD SW, TR COMET TRAIL, LOT AT END ON RIGHT

SUBDIVISION BADGER CREEK BLOCK / SECTION II LOT 8 LOT AREA 5.19 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 160 Date 39-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 540
No Lines SIX Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

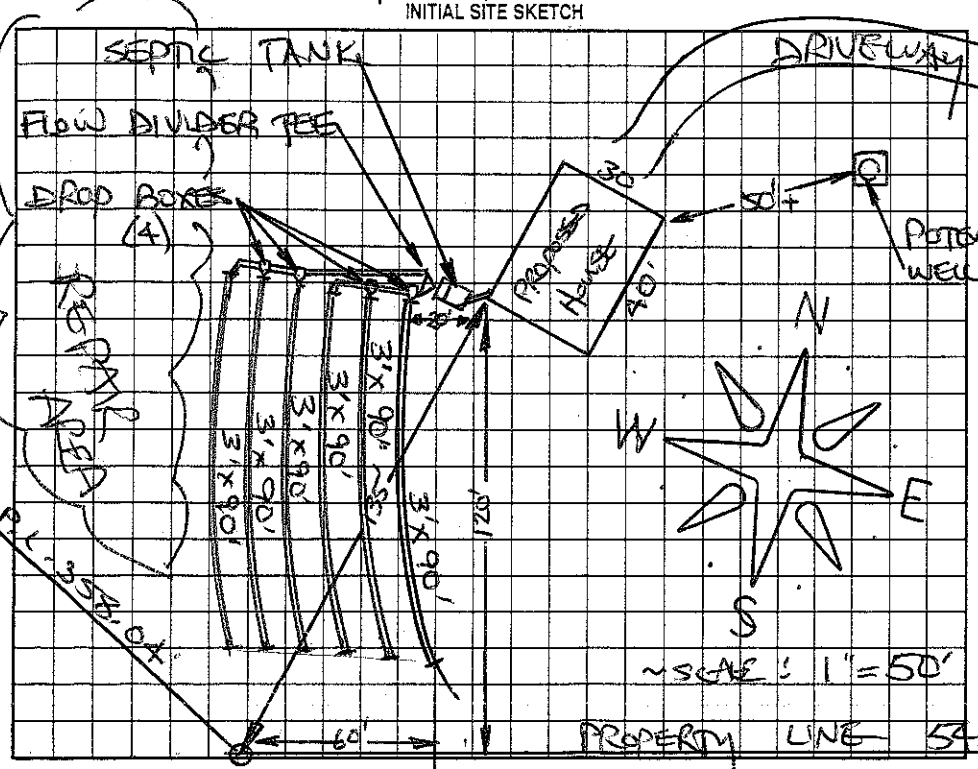
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

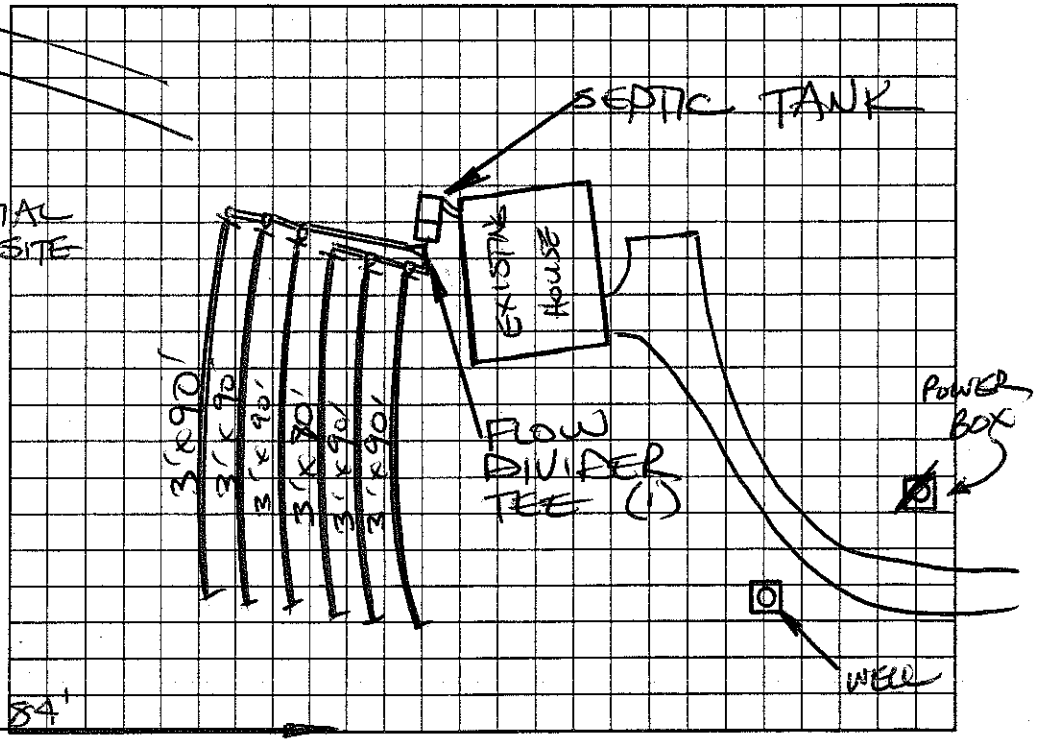
Comments:/Conditions: ① INSTALL LINES ON CONTOUR AS SHOWN, NO DEEPER THAN 36" DEEP. ② USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES AS SHOWN.

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER. HOUSE RELOCATED AS SHOWN W/o PRIOR H.D. APPROVAL

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: David M. Sorensen date 9-4-03

Improvement Permit by: STEVE HEDRICK date 9-4-03

Authorization to Construct by: STEVE HEDRICK date 9-4-03

Installed by: DAVID UMBARGER

Operation Permit by: STEVE HEDRICK date 5-13-05

Existing System Inspection by: _____ date _____

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