IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 137209 PIN# 4713327113 DATE 8-17-06

OWNER OR APPLICANT JOHN & Kelly Hinson PHONE: Business 704-201-4153 Home 704-872-9340

ADDRESS 198 JACOBS WOODS CR TROUTMAN, N.C. 28166

LOCATION 70 WEST (L) OMR (R) CELESTE EUFOLA (R) DIRT BOX # 235

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.06 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1012 Date 4-30-06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 5x72' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: 6 GRAVITY 25% REDUCT

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Persons 6 No. Employees _____

Water Supply: ☐ Individual ☒ Public ☐ Community

Gravel Depth N/A ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

(1) INSTALL DRAINLINES AT 36" DEEP

(2) INSTALL LINES ON CONTOURS MAINTAIN SETBACKS

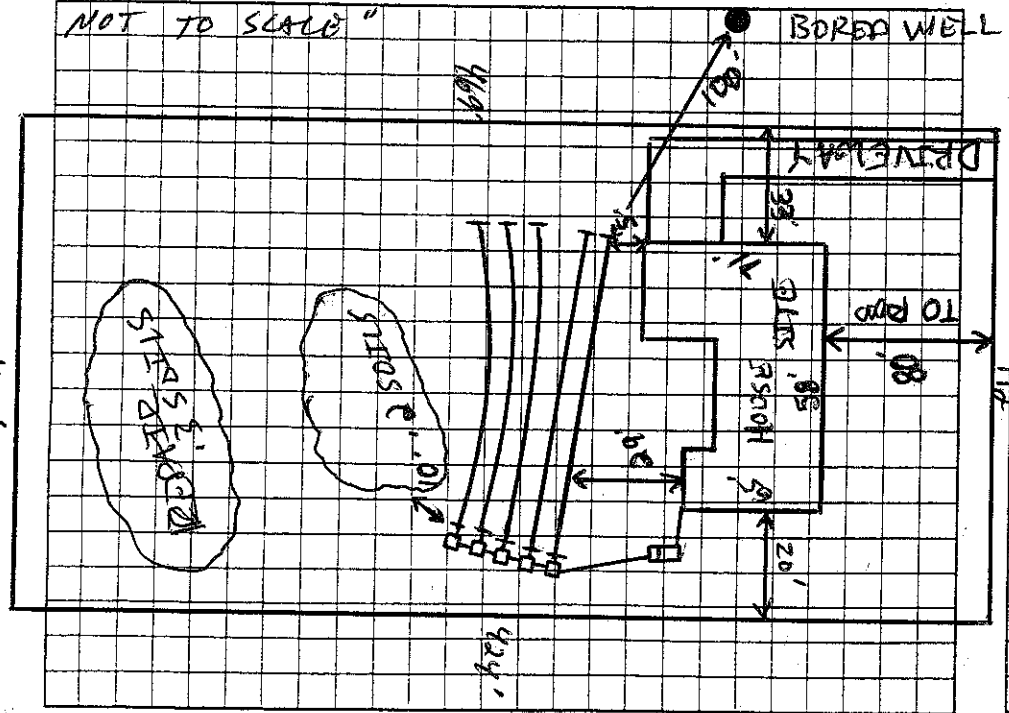
(3) CALL Prior to installation for FIELD OUT. Keep System AS CLOSE TO 465' P/L AS POSSIBLE DUE TO BETTER SOILS

Comments:/Conditions:

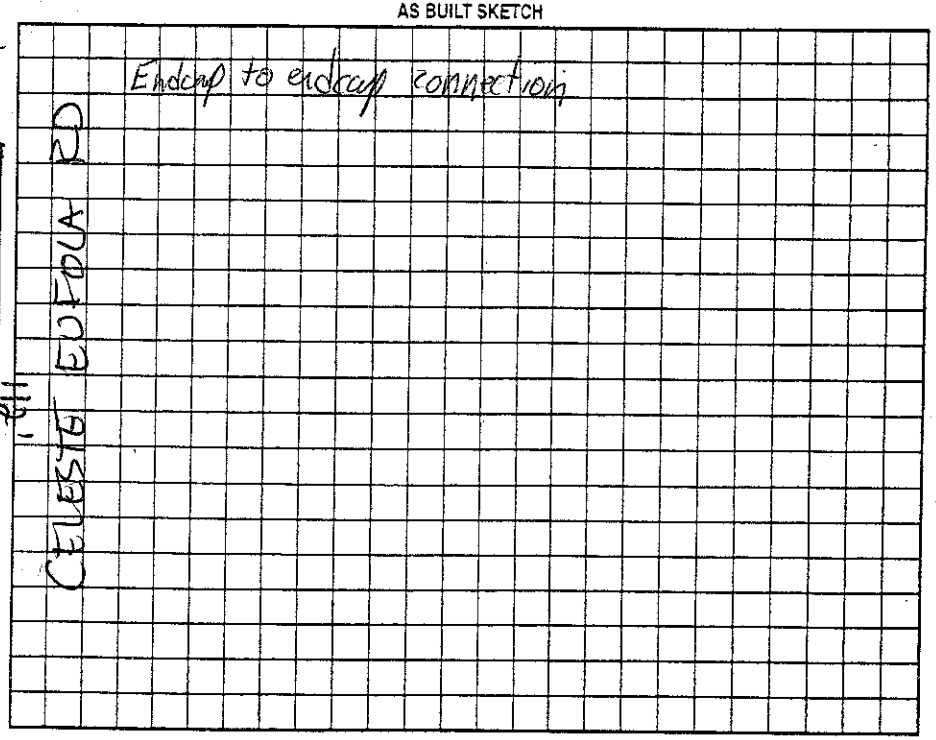
Yellow Filter

ST marker

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: _____ date _____

Improvement Permit by: _____ date 8/7-06

Authorization to Construct by: _____ date 8/7-06

Installed by: Tommy Frye

Operation Permit by: _____ date 12-7-06

Existing System Inspection by: _____ date _____

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