(C1)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 129603 PIN# 4718-92-8467 DATE 6-24-06

OWNER OR APPLICANT O'BRIEN BUILDERS PHONE: Business 704-902-4310 Home 704-872-3442

ADDRESS 167 HIDDEN RIVER LANE, STATESVILLE NC 28625

LOCATION NC 115 NORTH, TL PISGAH ROAD, TL TREEBARK RD, TR HIDDEN RIVER AT END ON LEFT

SUBDIVISION HIDDEN RIVER BLOCK / SECTION ____ LOT 11 LOT AREA 2.80 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 794 - Billing Date 6-13-06
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ TO 1600 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 25% REDUCTION, CRAWLING
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other ____

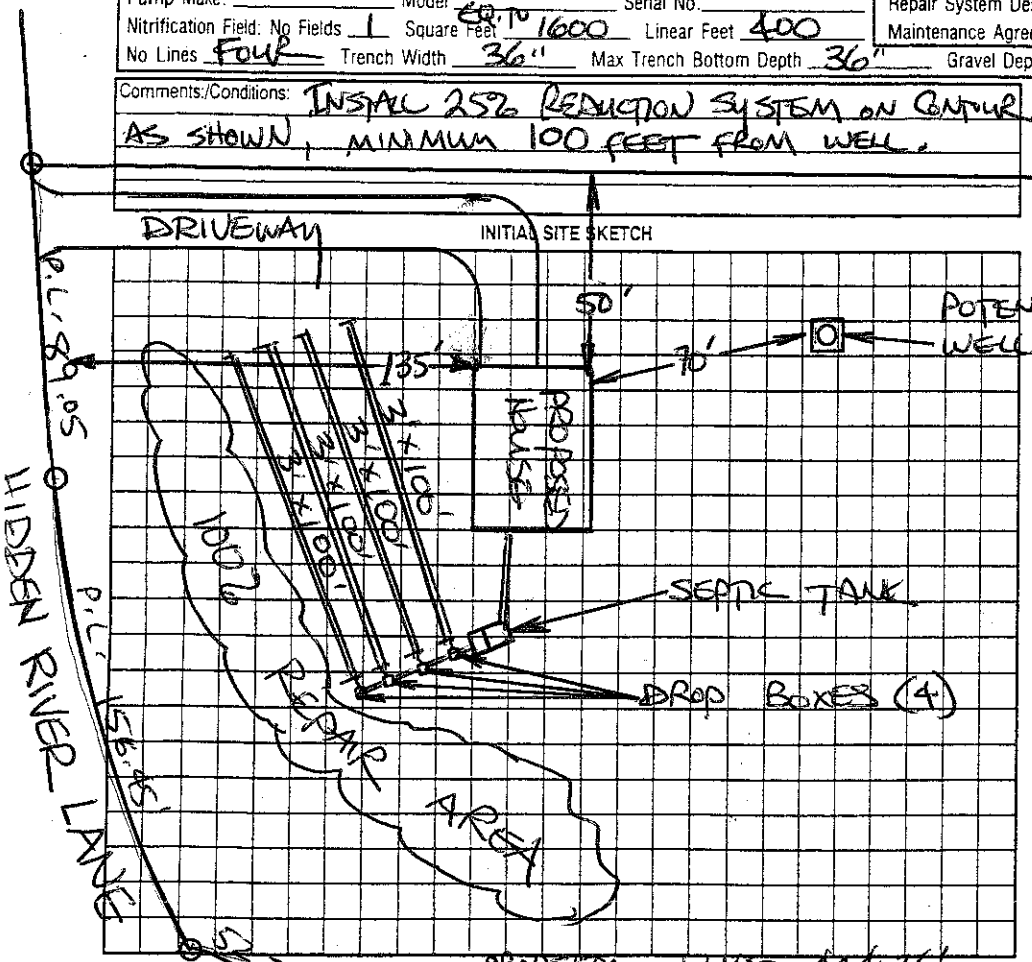
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

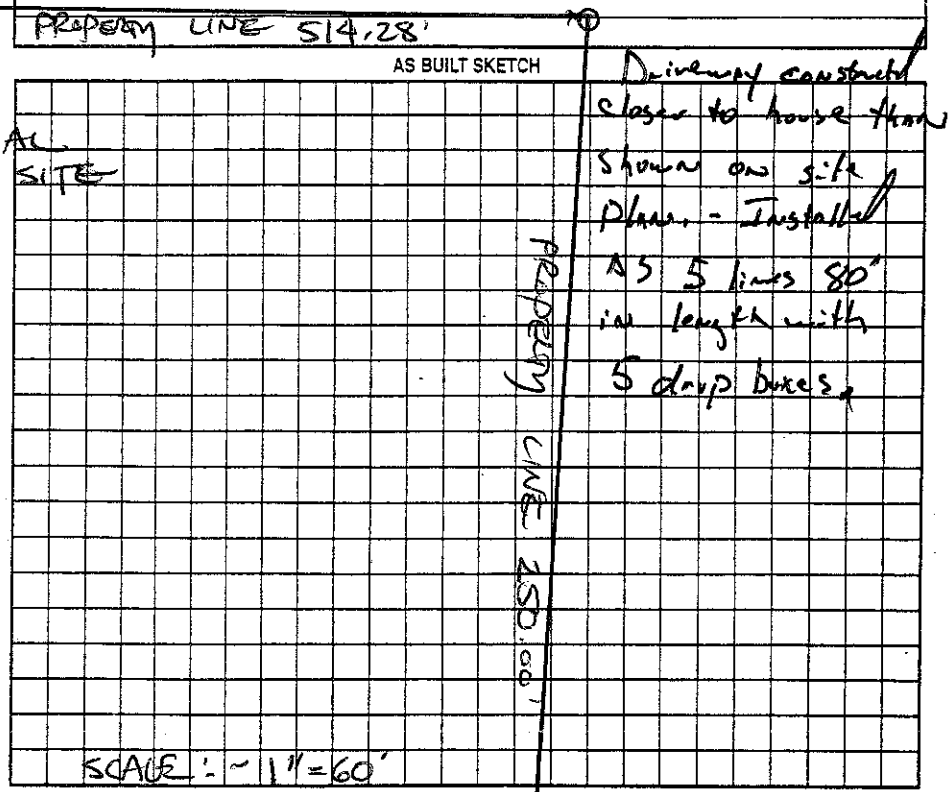
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN, MINIMUM 100 FEET FROM WELL.

Comments:/Conditions: Final installed. / Septic tank 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 7-17-06 Installed by: Kenny Madison

Improvement Permit by: STEVE HEDRICK date 6-24-06 Operation Permit by: ____, R.S. date 29 December 06

Authorization to Construct by: STEVE HEDRICK date 7-12-06 Existing System Inspection by: ____ date ____

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