IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 134585 PIN# 4722361342 DATE 4-10-06

OWNER OR APPLICANT Pamela & Jessie Hedrick PHONE: Business _____ Home 704 528 2697

ADDRESS 167 Orville Lane

LOCATION From Old Mtn. Rd - Turn on Orville Ln - 4th resident

SUBDIVISION n/a BLOCK / SECTION n/a LOT Apx LOT AREA ±94 SITE CLASS. DS DESIGN FLOW 360 L.T.A.R. Ex.

Septic Tank: Ex. Gallons; STB Ex. Date Ex.
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields Ex. Square Feet Ex. Linear Feet Ex.
No Lines Ex. Trench Width Ex. Max Trench Bottom Depth Ex. Gravel Depth _____

☐ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Ex.
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☐ No

☐ Gravity ☐ Pressure

☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other _____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

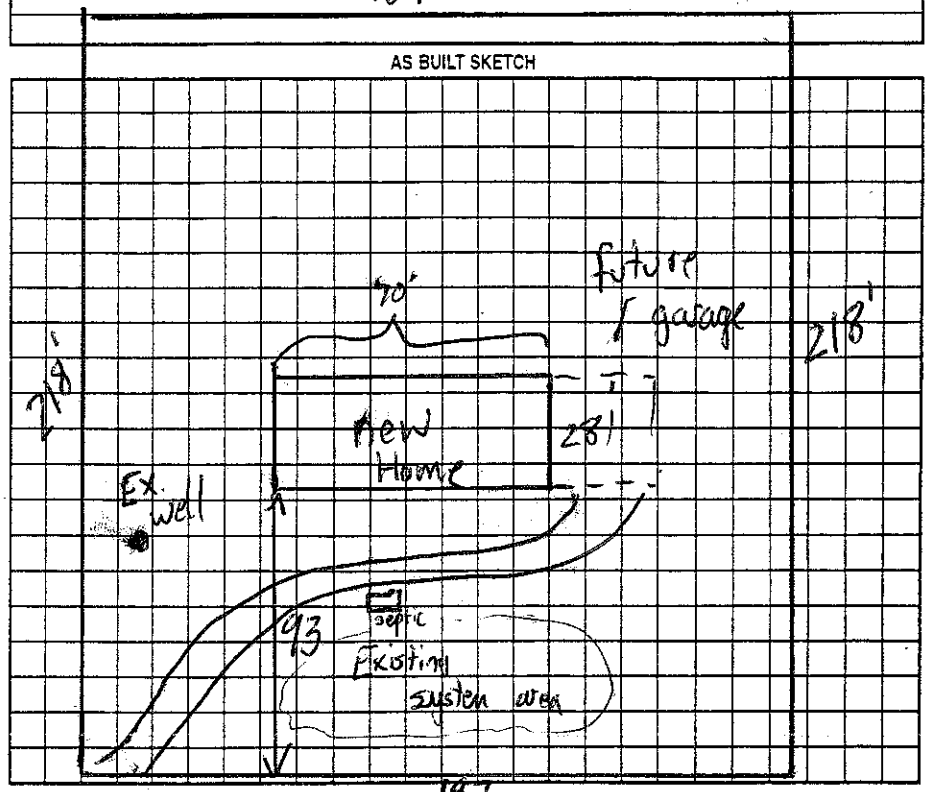
Comments:/Conditions:

INITIAL SITE SKETCH

Comments:/Conditions:

187

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 04/17/06 Installed by: _____

Improvement Permit by: _____ date _____ Operation Permit by: _____ date _____

Authorization to Construct by: _____ date _____ Existing System Inspection by: _____ date 4-10-06

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