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IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☐ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # REPAIR PIN # 4725-33-4254 DATE APRIL 23 2012

OWNER DARLENE McLAIN APPLICANT: MELISSA ALEXANDER PHONE: Home/Cell # 704-252-2842 Business #

SITE ADDRESS 117 BUTTERFIELD CIRCLE OWNER / APPLICANT ADDRESS

SITE DIRECTIONS NC 90 WEST, TL BUTTERFIELD CIRCLE, 2ND HOUSE ON LEFT AT BOX #117

SUBDIVISION WEST MONTICELLO BLOCK / SECTION LOT # 2 LOT AREA 0.434 ACRE DESIGN FLOW 240 L.T.A.R. 0.25 GPD/FT2

Septic Tank 1000 Gallons: STB 160 Date 2-3-12 ☐ New System ☑ Repair ☐ Expansion System Type I II (III) IV V VI

Pump Tank ____ Gallons: P T ____ Date ____ System Description: ____

Pump Make ____ Model ____ Serial # ____ Repair System Description: 25% REDUCTION, GRAVITY

No. Nitrification Fields: 1 No. Lines 4 Linear Feet 240 Maintenance Agreement Required ☐ YES ☑ NO

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A ☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 2 ☐ Business No. Persons ____ ☐ Other No. Employees ____ ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply ☐ Private ☑ Public ☐ Community

Comments / Conditions ① CRUSH & FILL EXISTING SEPTIC TANK

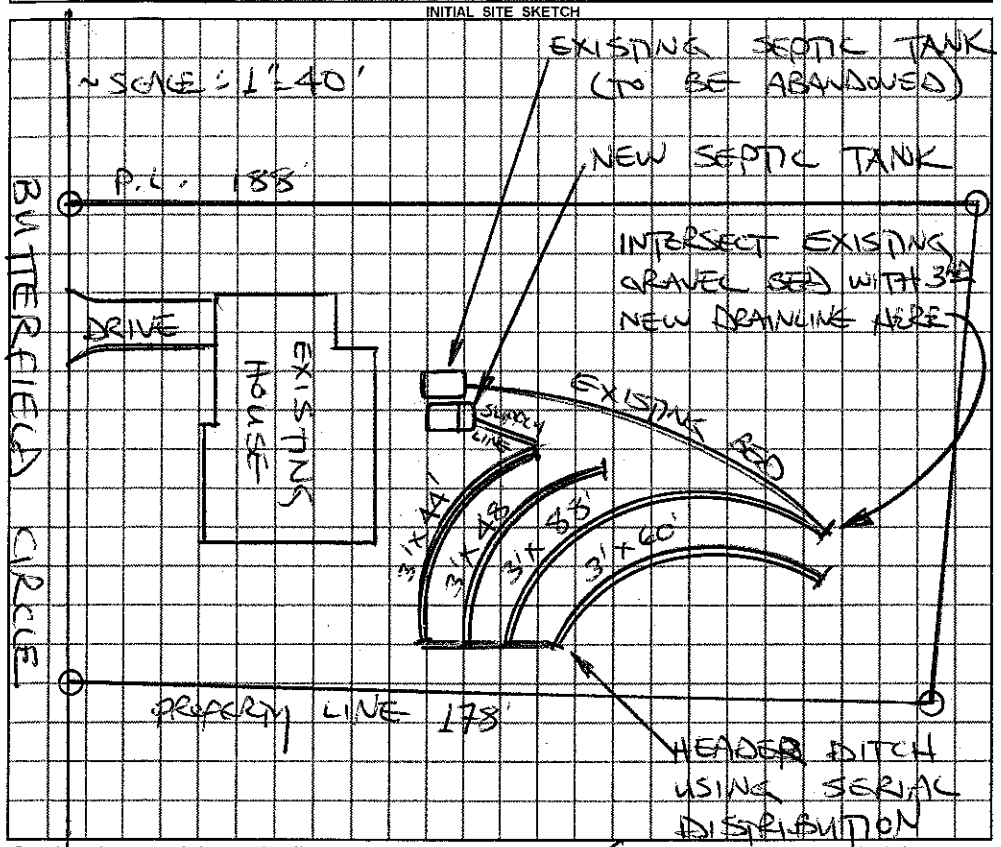
② INSTALL 25% REDUCTION DRAINLINES ON CONTOUR

③ INTERSECT EXISTING BED AT LOCATION SHOWN WITH 3RD NEW DRAINLINE.

SEPTIC TANK WITH MARKER INSTALLED

USING RED "POLYLOK" RISER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED ACCORDING TO INITAL SITE 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 plat valid without expiration. site plan valid 60 mo.* ☑ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Lorri Bowles Date ____ Installed by: KEVIN BOWLES

IMPROVEMENT PERMIT by: STEVE HEDRICK REHS Date 4-23-2012 OPERATION PERMIT by: STEVE HEDRICK REHS Date 4-30-12

AUTHORIZATION TO CONSTRUCT by: STEVE HEDRICK REHS Date 4-23-2012 Existing System Inspected by: ____ REHS Date ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant