IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 126322 PIN# 4726-03-1246 DATE 3-23-05

OWNER OR CONTRACTOR TBJ PROPERTIES, LLC PHONE: Business 704-902-4618 Home 704-876-1984

ADDRESS 413 MILLER FARM RD, STATESVILLE, NC 28625

LOCATION NC 115 North TL Scotts Creek Rd, TL Celtic Ridge Dr, TR W. Edinburgh Ct, at end on left

SUBDIVISION CELTIC RIDGE BLOCK / SECTION ____ LOT 34 LOT AREA 0.777 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 3-5-07

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields ____ Square Feet 1440 Linear Feet 360

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 50% REDUCTION, LOW-PRESSURE

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

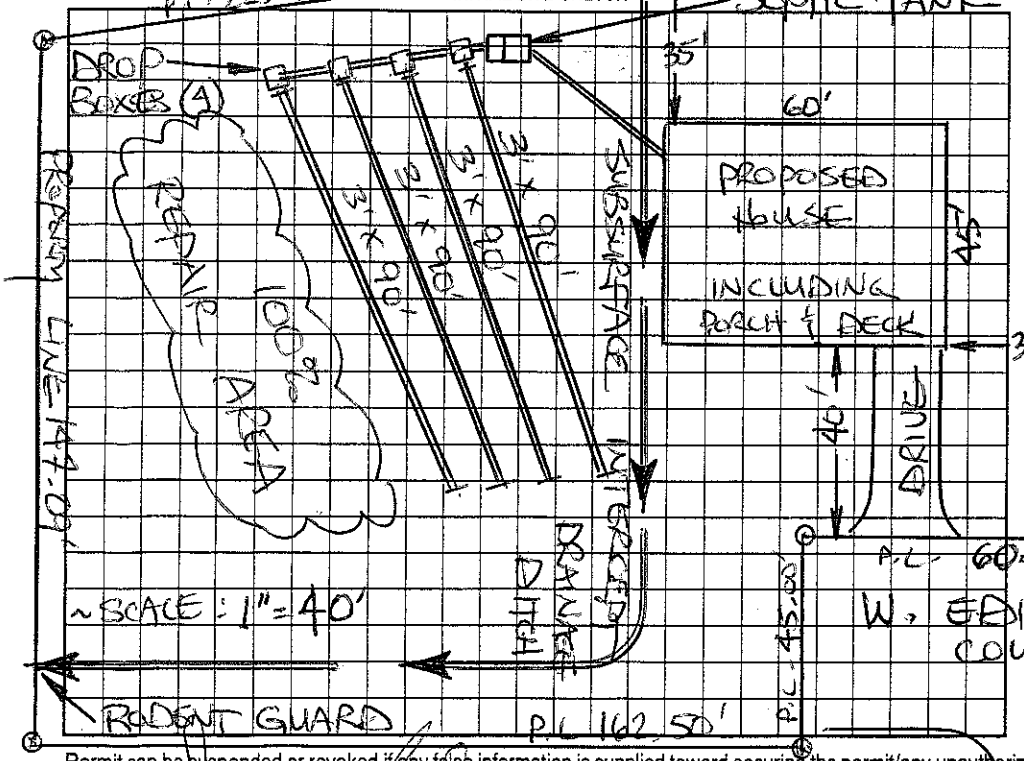
☐ Other ____

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

Water Supply: ☐ Individual ☑ Public ☐ Community

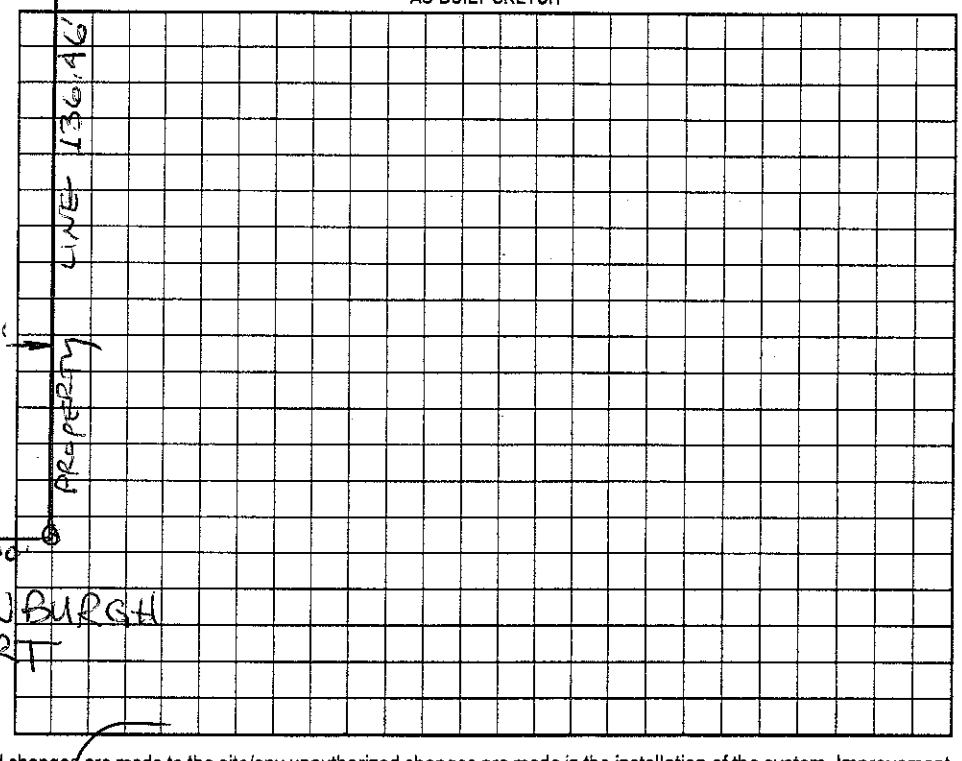
Comments:/Conditions: ① INSTALL 25% REDUCTION SYSTEM ON CONTOUR NO DEEPER THAN 30" ② INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 42" DEEP OUT TO DAYLIGHT (MINIMUM 12" FALL)

INITIAL SITE SKETCH



Comments:/Conditions: Yellow Surface Septic tank marker

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: [signature] date 3-23-05 Installed by: [signature]

Improvement Permit by: STEVE HEDRICK date 3-23-05 Operation Permit by: [signature] date 8-10-07

Authorization to Construct by: STEVE HEDRICK date 3-14-07 Existing System Inspection by: ____ date ____

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