IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093145 PIN# 4626 61 8000 DATE 12-6-00

~~OWNER~~ OR CONTRACTOR STANDARD BUILDING CO. PHONE: Business ______ Home 902-4618

ADDRESS 843 SLOAN'S MILL ROAD, OLIN, NC 28660

LOCATION NC 115N, TL SCOTTS CREEK RD, TL MILLER FARM RD TR FAWNWOOD DRIVE AT END ON RIGHT

SUBDIVISION FAWNWOOD BLOCK / SECTION II LOT 15' LOT AREA 0.66 ACRE SITE CLASS. PS DESIGN FLOW 360' L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 10/2 Date 9-13-01

Pump Tank: ______ Gallons; PT ______ Date ______

Pump Make: ______ Model ______ Serial No. ______

Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360

No Lines SIX Trench Width 36" Max Trench Bottom Depth 36" ~~Gravel~~ Depth SAND 6"

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

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

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other ______

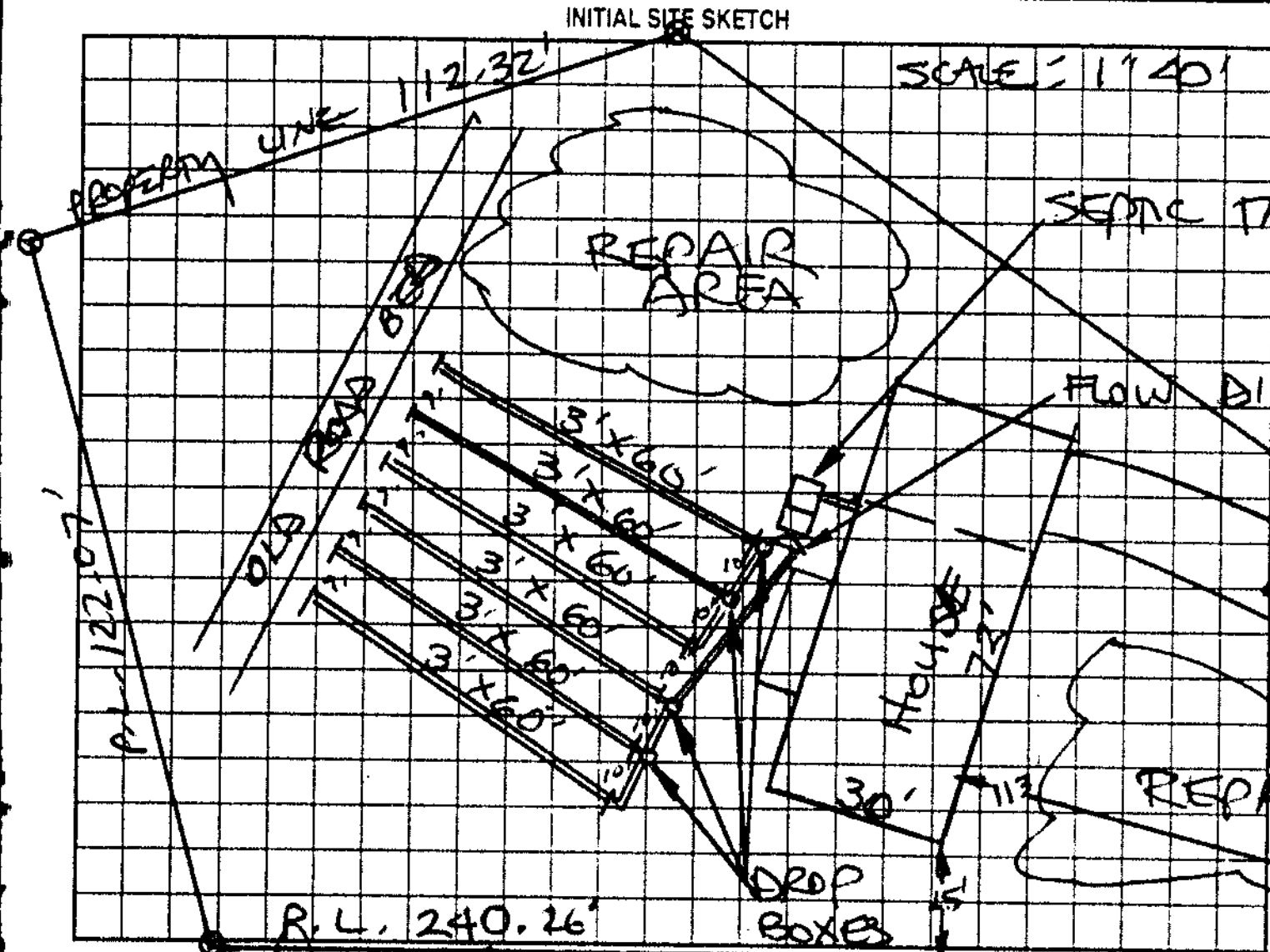
No. Bedrooms 3 No. Bathrooms 2 No. Employees ______

Water Supply: ☐ Individual ☑ Public ☐ Community

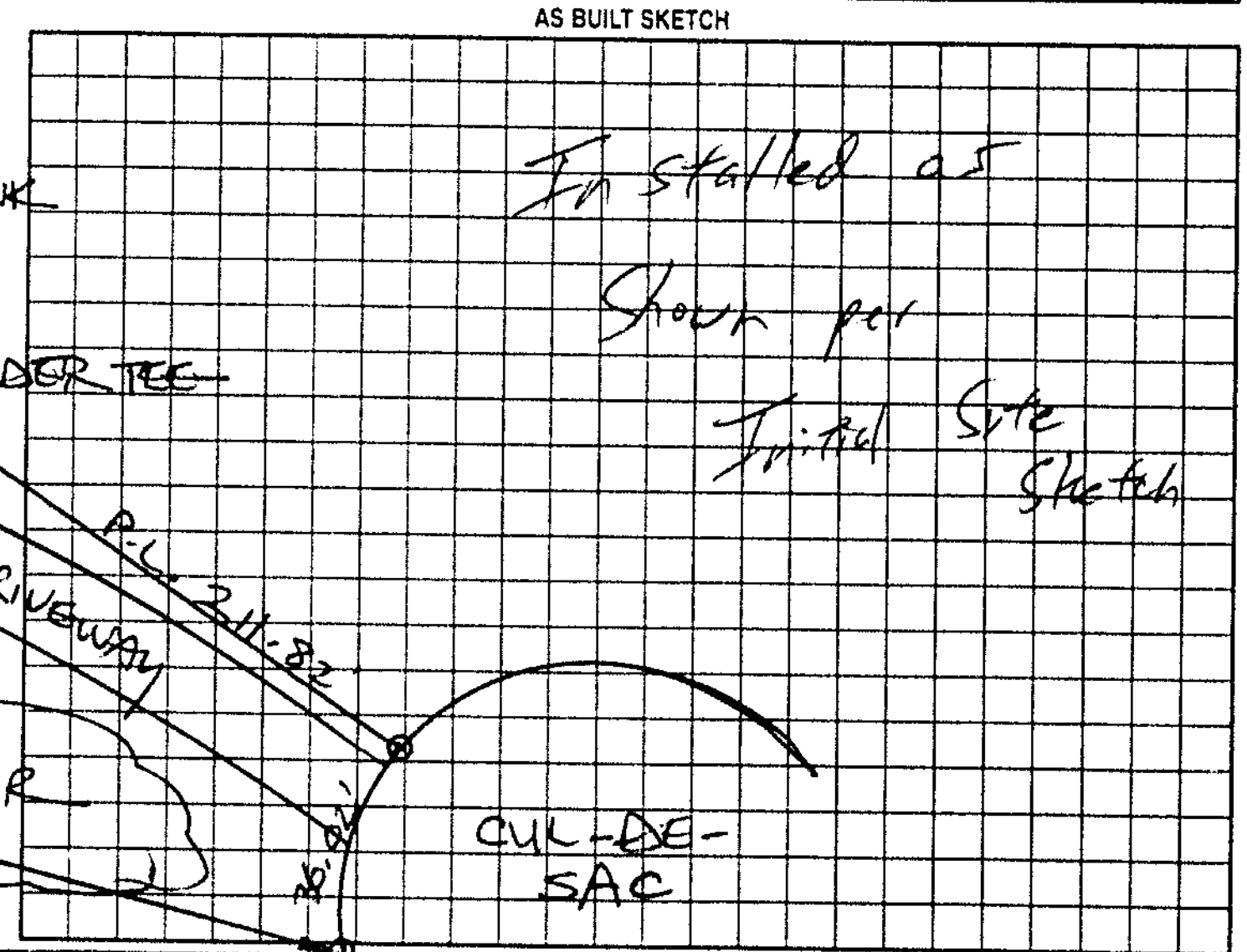
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM USING SIXTY (60) CHAMBERS OR 36 HDS SECTIONS

Comments /Conditions: - Polylok Filter Installed - Septic Tank Marker Installed - Installed 60 Chambers - Infiltrator

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: [signature] date 12-6-00 Installed by: Tommy Frye

Improvement Permit by: STEVE HEDRICK date 12-6-00 Operation Permit by: William O. Johnson EI date 4-23-01

Authorization to Construct by: STEVE HEDRICK date 12-6-00 Existing System Inspection by: ______ date ______

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