IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089810 PIN# 4727 81 1992 DATE 6-13-2000

OWNER OR CONTRACTOR R.E. FOY & SON BUILDER PHONE: Business (828) 312-5421 Home (828) 635-0205

ADDRESS 410 MEADOW RIDGE DRIVE, TAYLORSVILLE, NC 28681

LOCATION NC 115 NORTH, TR RED CHIMNEY RD, TR FOY LANE, 4TH LOT ON RIGHT

SUBDIVISION North Crossing BLOCK / SECTION I LOT 2 LOT AREA 0.558 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 9-5-00
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300 ft
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Depth SAND 6"

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

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

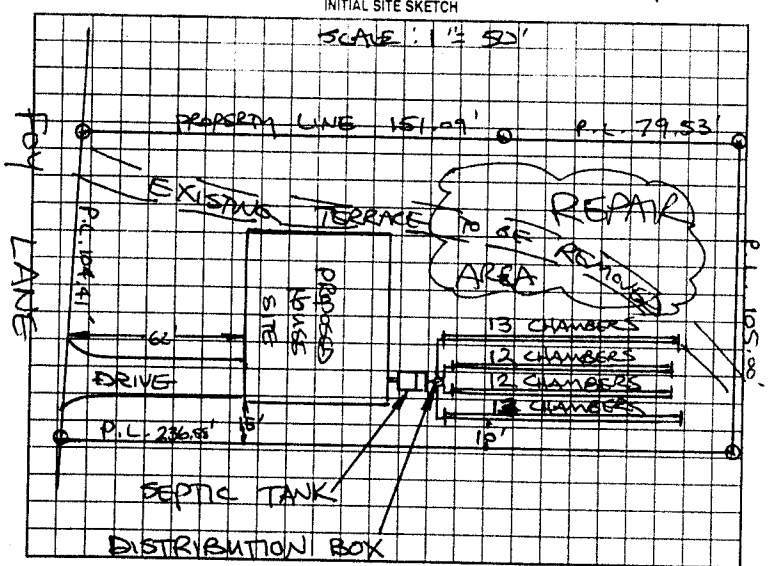
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

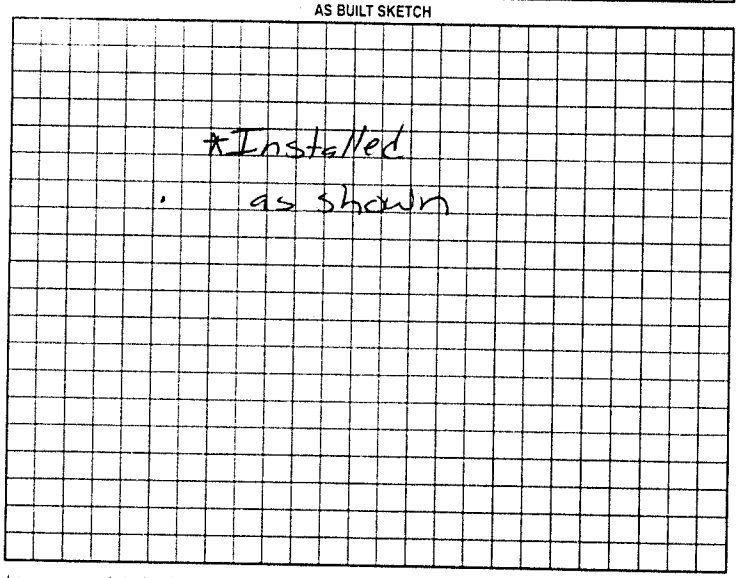
Comments/Conditions: ① REMOVE EXISTING FIELD TERRACE ② INSTALL LINES AS SHOWN USING 25% REDUCTION SYSTEM AS SHALLOW AS POSSIBLE ③ LINE INSTALLED INTO LESS THAN 2% SLOPE

Comments/Conditions: * Note tank at end of house Right of Deck

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: Mark A. Foy date 6-21-2000 Installed by: Tommy Cothern

Improvement Permit by: STEVE HEDRICK date 6-13-2000 Operation Permit by: [illegible] date 10-24-00

Authorization to Construct by: STEVE HEDRICK date 6-13-2000 Existing System Inspection by: ____ date ____

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