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 # 151330 PIN # 4730-32-9940 DATE 6-20-11

OWNER Jeffery L. Morrison APPLICANT: PHONE: Home/Cell # 704 902 5412 Business # 704 902 5486

SITE ADDRESS 121 Holly Branch Rd. OWNER / APPLICANT ADDRESS 121 Holly Branch Rd, Troutman, NC

SITE DIRECTIONS 215 (R) on Perth Church Rd. (L) on Honeycutt Rd (R) Holly Branch, site on left

SUBDIVISION Holly Branch BLOCK / SECTION LOT # 22F LOT AREA 1.73 Ac DESIGN FLOW 480 L.T.A.R. .3

Septic Tank 1,000 Gallons: STB 1007 Date 9-29-06 ☒ New System ☐ Repair ☐ Expansion System Type I II III IV V VI

Pump Tank Gallons: P T Date System Description: 25% Reduction Gravity

Pump Make Model Serial # Repair System Description: 50% Reduction LPP

No. Nitrification Fields: Ex No. Lines Ex Linear Feet Ex Maintenance Agreement Required ☐ YES ☒ NO

Trench Width Ex Max. Trench Bottom Depth Ex Gravel Depth N/A ☒ GRAVITY ☐ PRESSURE

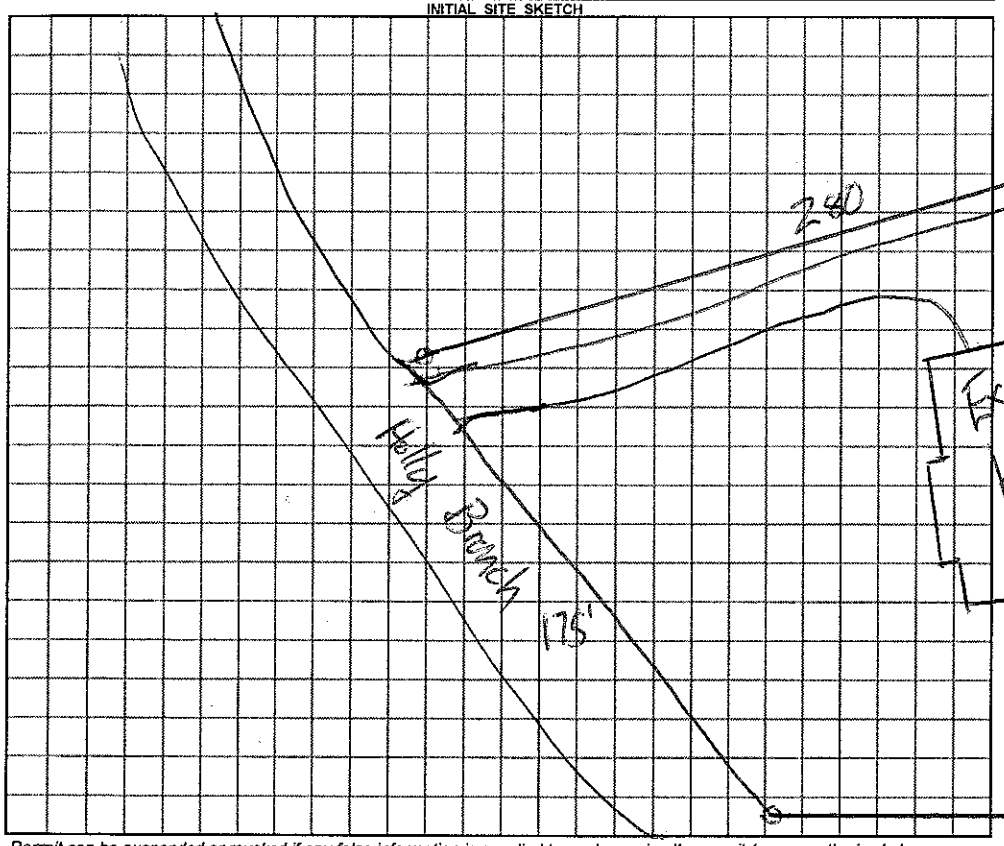
☒ Residence No. Bedrooms 4 ☐ Business No. Persons ☐ Other No. Employees ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

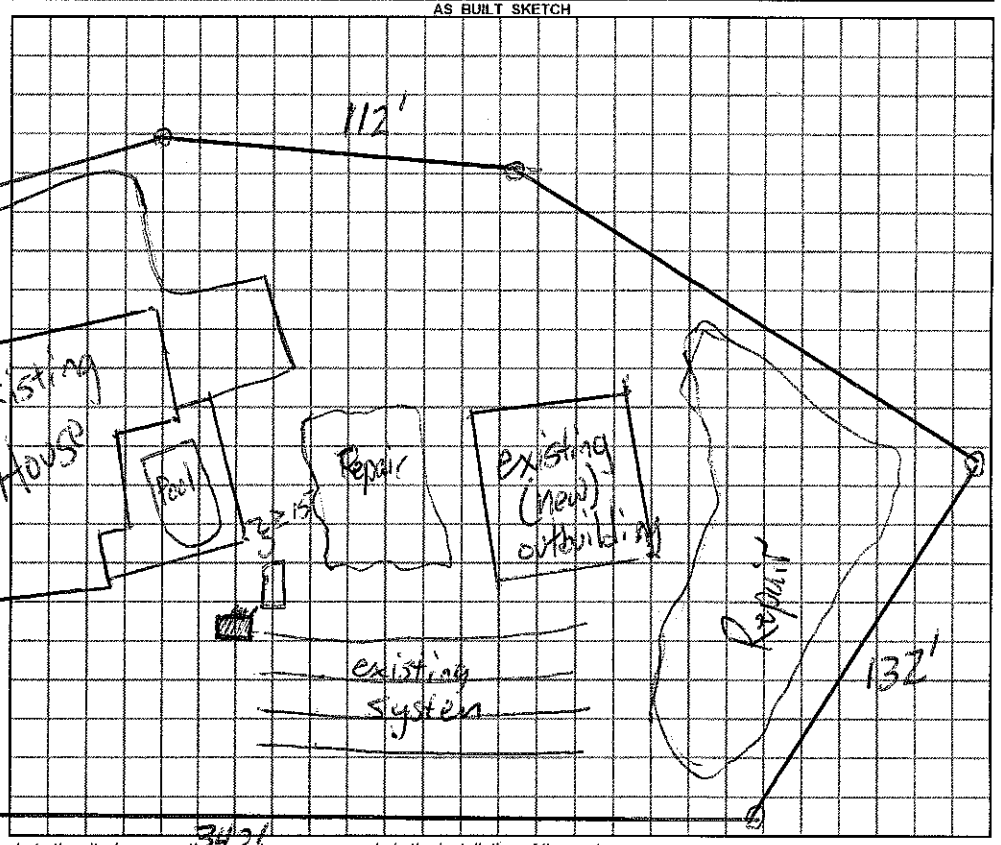
Comments / Conditions

1" = 60'

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if 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: [signature] Date 6-23-11 Installed by:

IMPROVEMENT PERMIT by: ***REHS*** Date OPERATION PERMIT by: ***REHS*** Date

AUTHORIZATION TO CONSTRUCT by: ***REHS*** Date Existing System Inspected by: [signature] ***REHS*** Date 6-20-11

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

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