THIS PERMIT VOIDS PREVIOUS ISSUED 6-3-99

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 07-Z-1198 PIN# 4730 48 6343 (PT) DATE 4-15-00

OWNER OR CONTRACTOR C & S ASSOCIATES PHONE: Business (336) 475-4111 Home

ADDRESS 904 SALEM STREET, THOMASVILLE, NC 27360

LOCATION US 21 S, TR PERTH RD, TR STATE PARK RD, 10TH LOT ON RIGHT

SUBDIVISION MEADOW GLEN BLOCK / SECTION I LOT 18 LOT AREA 0.3685 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB Rowan 825 Date 6/2/00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields I Square Feet Req. 1440 Linear Feet 360+

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

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 50% REDUCTION LOW PRESS

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

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

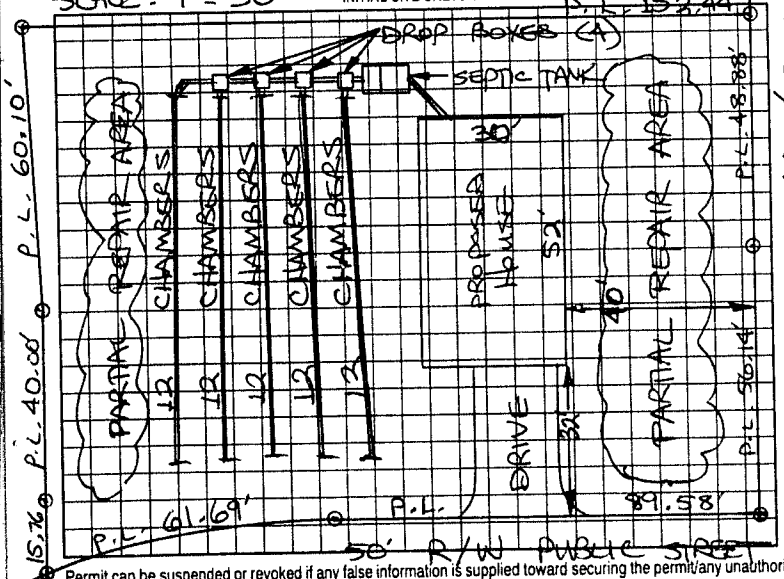
Water Supply: ☐ Individual ☐ Public ☐ Community

Comments/Conditions: INSTALL 25% REDUCTION SYSTEM USING SIXTY (60) CHAMBERS (AT OWNER'S REQUEST) ON CONTOUR AS SHOWN

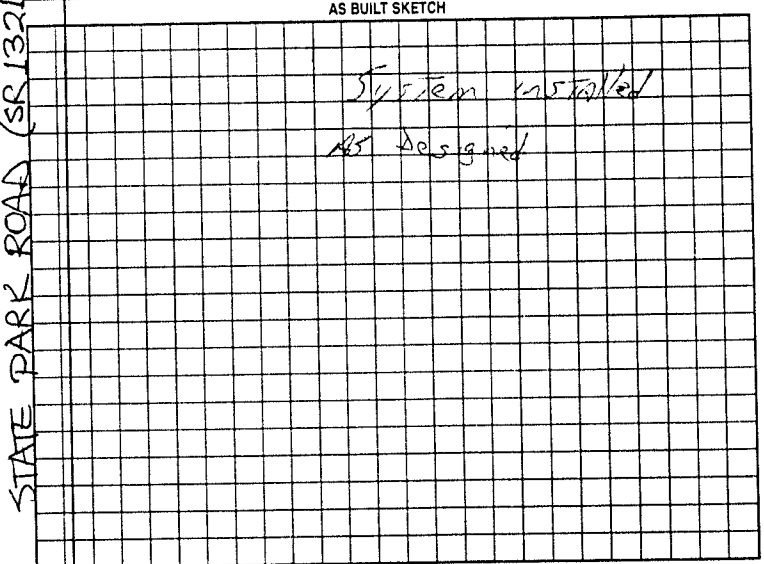
Comments/Conditions:

SCALE: 1" = 30'

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: _____ date 5-9-00 Installed by: Rowan Septic

Improvement Permit by: STEVE HEDRICK date 4-15-00 Operation Permit by: J C Potter date July 19 2000

Authorization to Construct by: STEVE HEDRICK date 4-15-00 Existing System Inspection by: _____ date _____

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