94899

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 300.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 01(S) -2- 0110 PIN# 4757-35-2459 DATE Jan 23, 01

OWNER OR CONTRACTOR C&S Associates PHONE: Business 202-4971 Home

ADDRESS 4474 Lake Dr. Sherrills Ford, N.C. 28673

LOCATION State Park Rd. TR into Meadowglen TR Valley Glen on South Irish Lane - access from pet w/ Valley Glen

SUBDIVISION Meadowglen BLOCK / SECTION 4 LOT 151 LOT AREA .34ac+ .52ac SFE SITE CLASS PS DESIGN FLOW 360 gpd L.T.A.R. 0.3

Septic Tank: 1000 Gallons: STB 825 Date 6-11-01
Pump Tank: 1000 Gallons: PT 302 Date 9-11-01
Pump Make: Zoeller Model N137 Serial No 132-0002
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 330
No Lines 6-9 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V
System Description: PUMP - Innovative 25% Red.
Repair System Description: 9A/LP Panel Block
Maintenance Agreement Required: ☐ Yes ☑ No OR Innov.

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

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

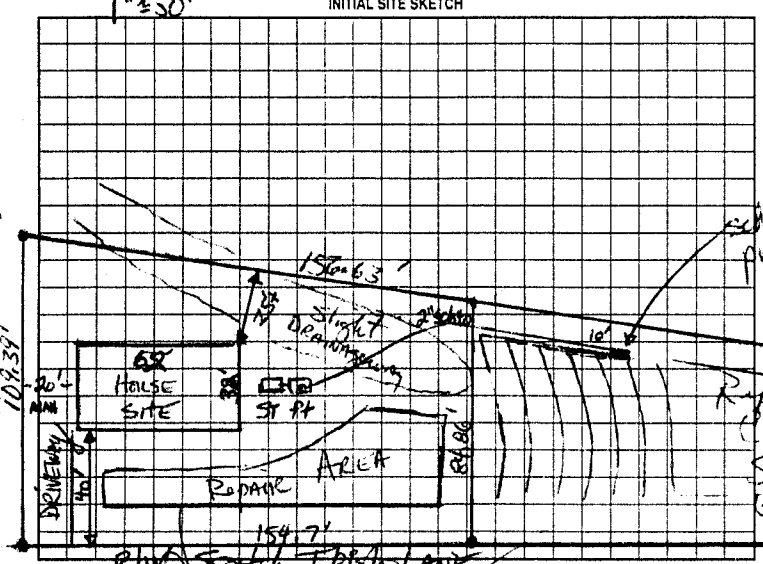
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: Install Equal Length Laterals

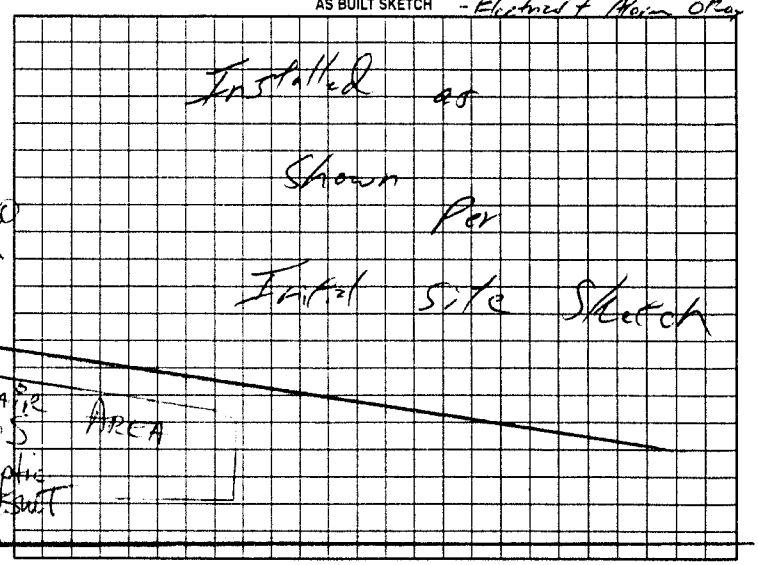
Comments/Conditions - Pump to Filter in Walls
- Install 50 In Filter Chambers
- Concrete Riser over T
- Remarked Check Okay

1" = 50'

INITIAL SITE SKETCH



AS BUILT SKETCH - Electrical Hook Okay



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 _____ Installed by: Rowan Septic

Improvement Permit by: _____ date 1-23-01 Operation Permit by: William C Johnson date 11/5/01

Authorization to Construct by: STEVE HENRICK date 2-26-01 Existing System Inspection by: _____ date _____

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