IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (CI) MOORESVILLE 704-664-5281

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

PERMIT# TRowman 143089 PIN# 4731-23-4126 DATE 5-19-07

OWNER OR APPLICANT MEDALLION PROPERTIES, INC PHONE: Business 704-634-1185 Home

ADDRESS 185 WHIPPOORWILL ~~ROAD~~, MOORESVILLE NC 28117

LOCATION US 21 SOUTH, TR TALLEY ROAD, TL TALLEY RIDGE DRIVE, 2ND LOT ON RIGHT

SUBDIVISION TALLEY RIDGE BLOCK / SECTION ____ LOT 2 LOT AREA 21,792 ft² SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GAD/ft²

Septic Tank: 1000 Gallons; STB 825 Date 8-16-07

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 FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 50% REDUCTION, LOW PRESSURE

Maintenance Agreement Required: ☐ Yes ☑ No ☐ Other ____

☑ House/Mod. Home ☐ Mobile Home ☐ Business

No. Bedrooms 3 No. Persons ____ No. Employees ____

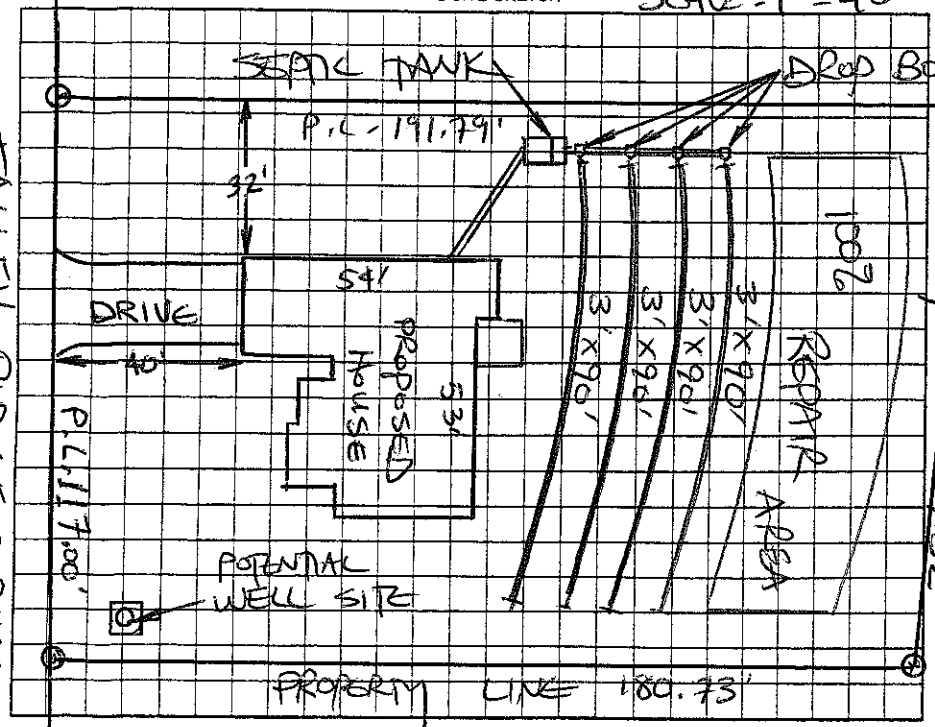
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

Comments/Conditions: GRADE LOT TO UNIFORM SLOPE & CALL HEALTH DEPT. TO FLAG-OUT SYSTEM PRIOR TO INSTALLATION. INSTALL 25% REDUCTION SYSTEM ON CONTOUR

Comments/Conditions: Blue Filter - Tuf-Tite

INITIAL SITE SKETCH ~ SCALE: 1" = 40'



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 5/22/07

Improvement Permit by: STEVE HEDRICK date 5-19-07

Authorization to Construct by: STEVE HEDRICK date 5-19-07

Installed by: Rowan Septic

Operation Permit by: [signature] date 10-2-07

Existing System Inspection by: ____ date ____

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

