IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# TRUIT/MW 09-036-07 14520 PIN# 4731-23-6199 DATE 4-21-07

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 STREET, TL TALLEY RIDGE DRIVE, 1ST LOT ON LEFT

SUBDIVISION TALLEY RIDGE BLOCK / SECTION LOT 19 LOT AREA 21,955 ft2 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB 825 Date 7-05-07
Pump Tank: 1000 Gallons; PT 302 Date 5-24-07
Pump Make: Zoeller Model N157 Serial No.
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 240
No Lines FIVE Trench Width 24" Max Trench Bottom Depth 36" SAND Gravel Depth 24"

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 50% REDUCTION, PUMP
Repair System Description: 50% REDUCTION, LOW PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No

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

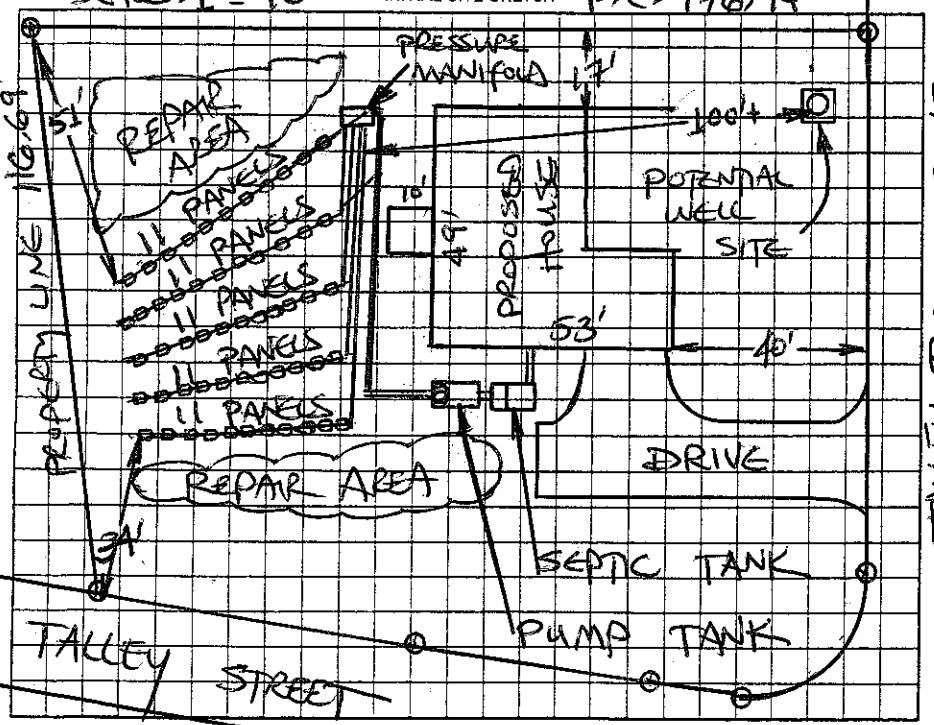
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

Comments/Conditions: ① INSTALL 50% REDUCTION SYSTEM USING 55 PPBPS PANELS ON CONTOUR AS SHOWN ~~② KEEP SYSTEM MINIMUM 100 FEET FROM WELL~~ ③ SEE ATTACHED SHEETS FOR PUMP & PRESSURE MANIFOLD REQUIREMENTS

Comments/Conditions: OK TO PLACE WELL MAXIMUM FEASIBLE DISTANCE FROM SYSTEM (NOT LESS THAN 50 feet) RSH 7-10-07

~SCALE: 1"=40' INITIAL SITE SKETCH P.L. 176.94'



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 4/24/07

Improvement Permit by: STEVE HEDRICK date 4-21-07

Authorization to Construct by: STEVE HEDRICK date 4-21-07

Installed by: Rowan Septic

Operation Permit by: [signature] date 5-6-07

Existing System Inspection by: date

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