$125.00 8-21-01 JP

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101481 PIN# 4737 35364 .12 DATE 8/13/01

OWNER OR CONTRACTOR CRANDLE & O'BRIEN CONSTRUCTION PHONE: Business 871-0536 Home

ADDRESS 310 TREEBARK RD - STATESVILLE NC 28625

LOCATION CHIPLEY FORD (N) - TL RED CHIMNEY - 4th ON RT

SUBDIVISION CHIMNEY RIDGE BLOCK / SECTION LOT 12 LOT AREA .685 AC SITE CLASS RS DESIGN FLOW 360GPD L.T.A.R. .36GPD/FT

Septic Tank: 1000 Gallons; STB 1072 Date 8-26-01
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4@ 75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: PUMP SAME
Maintenance Agreement Required: ☐ Yes ☑ No

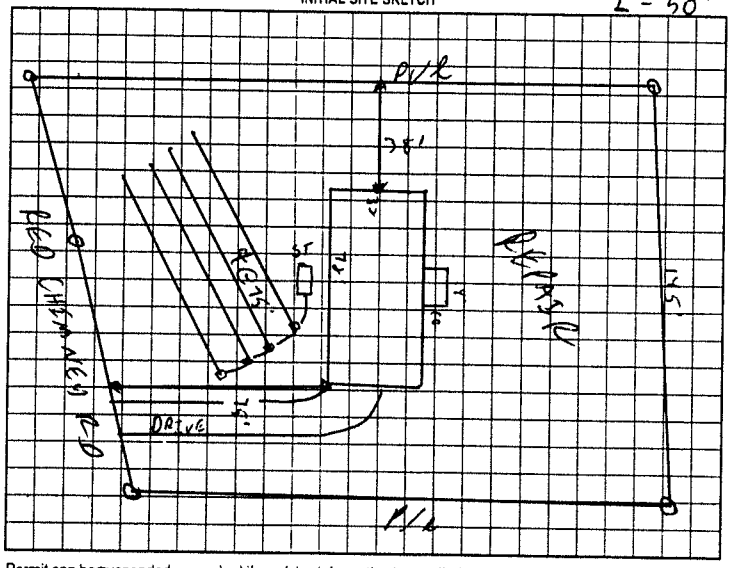
☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 3 No. Employees
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

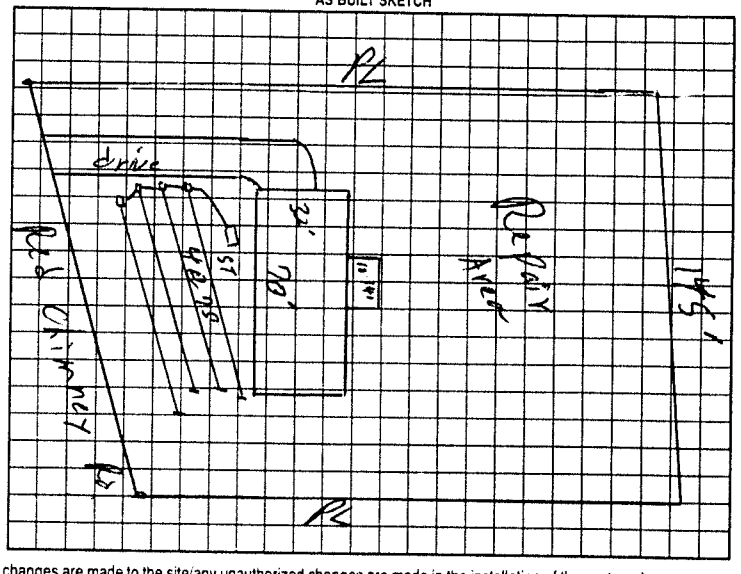
Comments/Conditions: INSTALL 25% REDUCTION SYSTEM USING FIFTY (50) CHAMBERS OR THIRTY (30) HDS SECTIONS

Comments/Conditions: - Installed 50 Chambers - In Fill Stone
- Installed Septic Tank Marker
- Installed Poly Lok Filter
Health Dept Employee gave prior okay to move tank

INITIAL SITE SKETCH 1" = 50'



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 8/21/01 Installed by: A1 Backhoe

Improvement Permit by: [signature] KS date 8/13/01 Operation Permit by: [signature] date 1/10/01

Authorization to Construct by: STEVE HEARICK date 8-22-01 Existing System Inspection by: date

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