IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☑ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT (1) **/ OPERATION PERMIT** (2) **/ EXISTING SYSTEM INSPECTION**

PERMIT # 163405 PIN # 4737-87-0130 DATE 27 October 10

OWNER Dixieland Inc. APPLICANT: PHONE: Home/Cell # (704) 876-6162 Business # (704) 202-4971

SITE ADDRESS 361 Blue Gill Ln. Statesville OWNER / APPLICANT ADDRESS 133 Redemption Rd. Statesville

SITE DIRECTIONS Chipley Ford TR Blue Gill Lot on left. Near end.

SUBDIVISION Poplar Ridge BLOCK / SECTION LOT # 33 LOT AREA 0.92ac. DESIGN FLOW 360 L.T.A.R. 0.3/1440

Septic Tank 1000 Gallons: STB 760 Date 7-3-10 ☑ New System ☐ Repair ☐ Expansion System Type I II (III) IV V VI ☑ Residence No. Bedrooms 3 Water Supply ☐ Private ☑ Public ☐ Community

Pump Tank Gallons: P T Date System Description: 25% Reduction ☐ Business No. Persons

Pump Make Model Serial # Repair System Description: 25% Reduction ☐ Other No. Employees

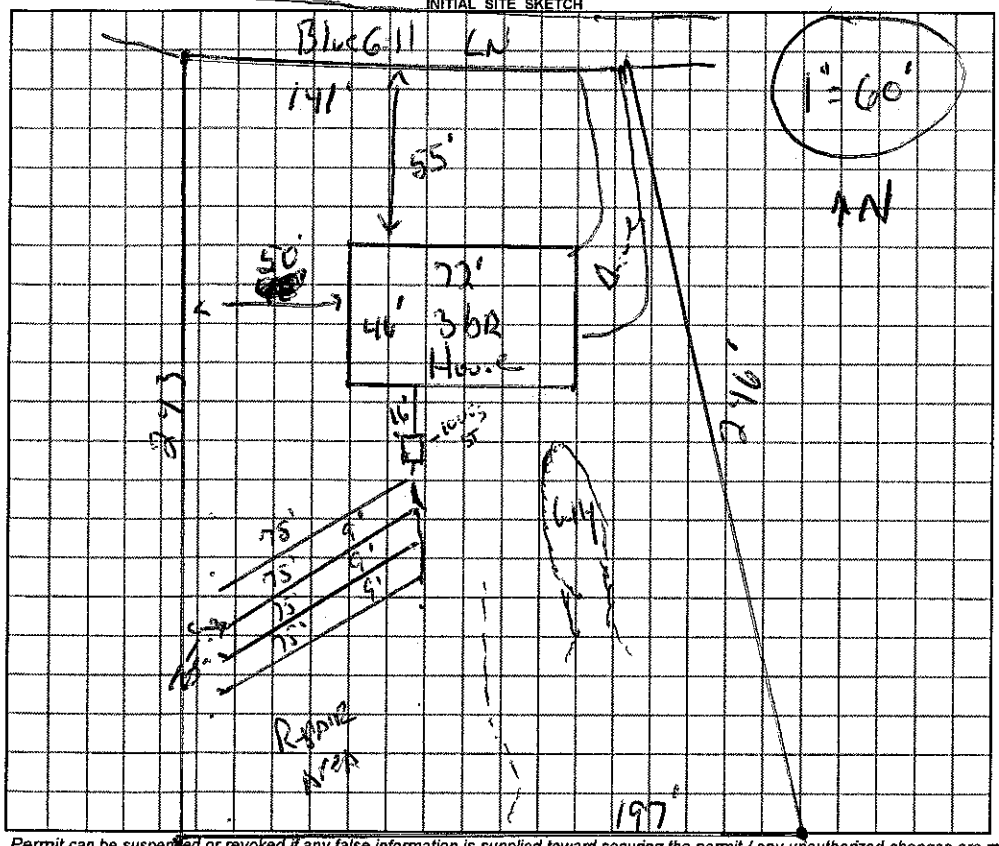
No. Nitrification Fields: 1 No. Lines 4 Linear Feet 300' Maintenance Agreement Required ☐ YES ☑ NO ☐ Slab ☐ Crawl Space

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth NA ☑ GRAVITY ☐ PRESSURE ☐ Basement w/plumbing ☑ Basement w/o plumbing

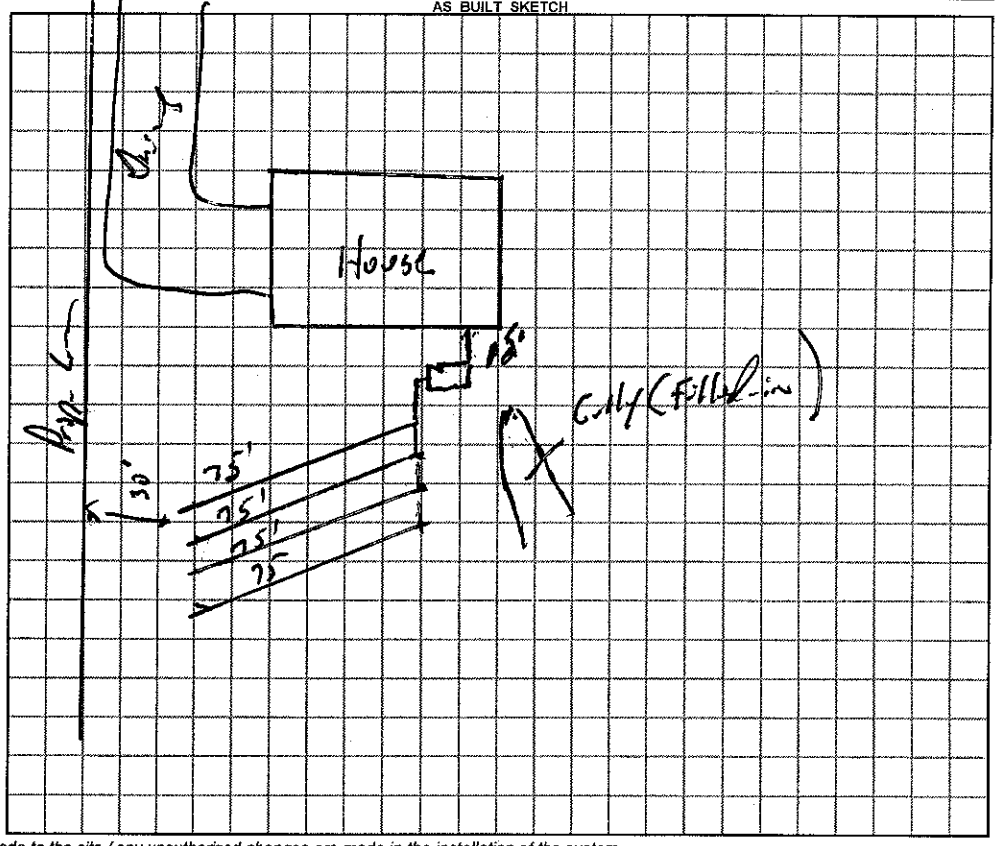
Comments / Conditions

Polylock Filter

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 plat ~~valid with expiration~~ expiring in 60 mo. ☑ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Regina Randle Date 11/4/10 Installed by: Gunter Grading

IMPROVEMENT PERMIT by: [signature], R.S. REHS Date 27 Oct. 10 OPERATION PERMIT by: [signature], R.S. REHS Date 8 Dec. 10

AUTHORIZATION TO CONSTRUCT by: [signature] R.S. REHS Date 27 Oct. 10 Existing System Inspected by: REHS Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant