IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 075735 PIN# 4738 01 4179 (PART) DATE 8-18-98

OWNER OR CONTRACTOR CRAVEN & OTHERS PHONE: Business (910) 672-2269 Home 872-6645

ADDRESS P.O. BOX 2257, ASHEBORO, NC 27204

LOCATION NC 115 N, TR BRANCHWOOD, TL RIVERFIELD, TR MOUNTAIN CREST, LOT AT END ON CUL-DE-SAC

SUBDIVISION RIDGECREST BLOCK / SECTION II LOT 108 LOT AREA 5.877 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 55 Date 7-14-98

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1600 Linear Feet 400

No Lines SIX Trench Width 36" Max Trench Bottom Depth 36"

☐ New System ☐ Repair System Type: I, II, (III) IV, V, VI

System Description: 25% REDUCTION SYSTEM

Repair System Description: 25% REDUCTION SYSTEM

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 2 No. Employees ____

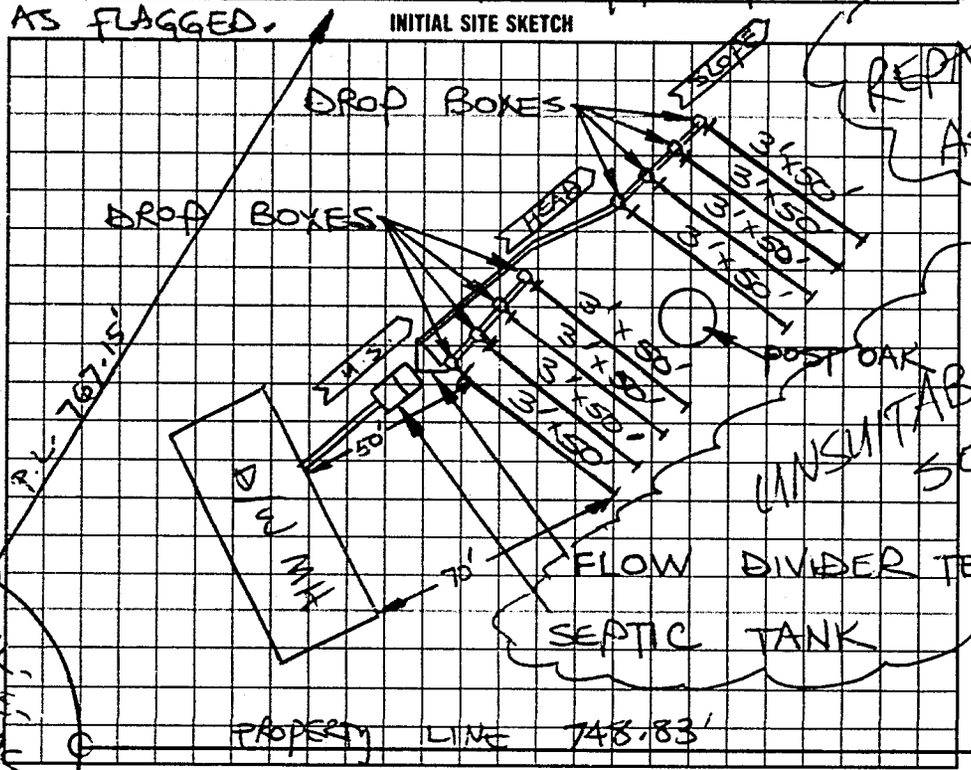
Water Supply: ☐ Individual ☑ Public ☐ Community

~~Gravel~~ Depth 8" SAND ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: ① USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION BETWEEN TWO SETS OF FOUR LINES EACH USING SERIAL DISTRIBUTION WITH DROP BOXES ② INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS FLAGGED.

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

Same as initial sketch

I understand that this 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 8-26-98

Improvement Permit by: STEVE HEDRICK date 8-26-98

Authorization to Construct by: STEVE HEDRICK date 8-26-98

Installed by: Tweet Landscaping (Burke Co)

Operation Permit by: R. C. Moore date 9-10-98

Existing System Inspection by: ____ date ____

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