Permit # 179820 Thao Yang

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 075736 PIN# 4738 01 4179 (PART) DATE 10-14-98

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

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

LOCATION NC 115 N, TR BRANCHWOOD, TL RIVERFIELD, TR MOUNTAIN CREST, AT END ON RIGHT

SUBDIVISION RIDGECREST BLOCK / SECTION II LOT 109 LOT AREA 5.012 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. @.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 9-12-98
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONV. GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

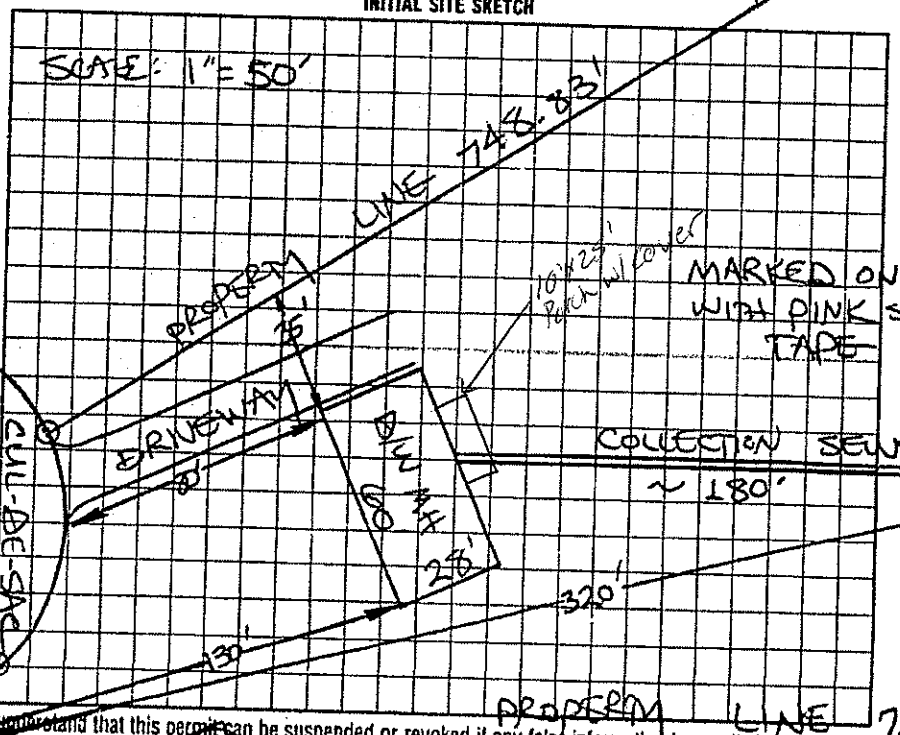
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

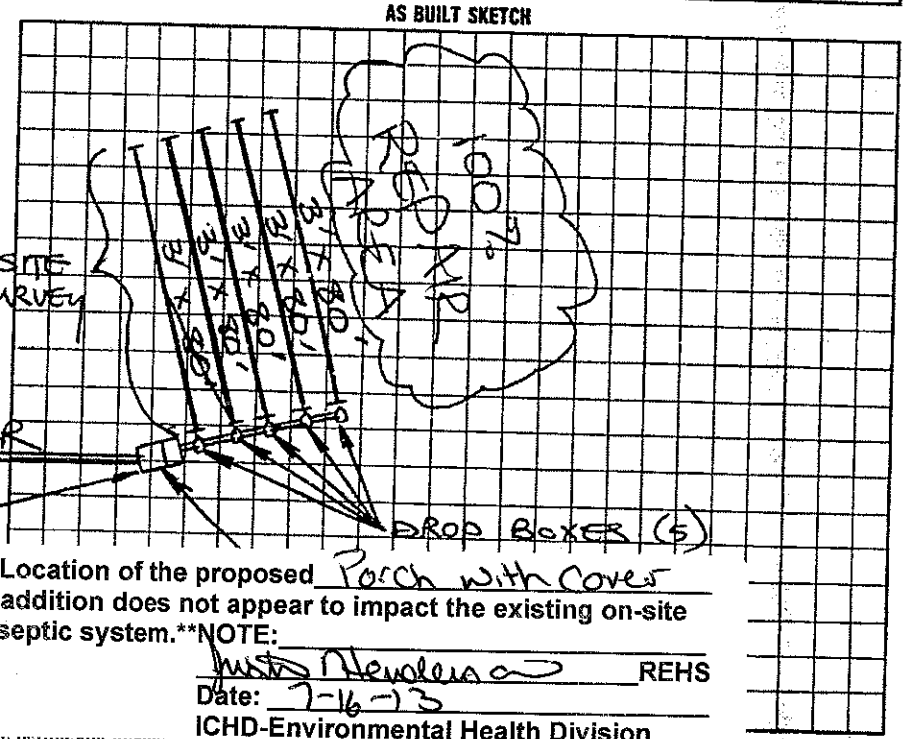
Comments:/Conditions:

Comments:/Conditions: SYSTEM INSTALLED ACCORDING TO INITIAL SITE SKETCH

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed Porch with Cover addition does not appear to impact the existing on-site septic system.**NOTE:

Justin Henderson REHS
Date: 7-16-13
ICHD-Environmental Health Division

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 ____

Improvement Permit by: STEVE HEDRICK date 10-14-98

Authorization to Construct by: STEVE HEDRICK date 10-14-98

Installed by: TOMMY FRYE

Operation Permit by: STEVE HEDRICK date 11-13-98

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