IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 075723 PIN# 4738 01 4179 (PART) DATE 9-5-98

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 ROAD, TL, FOREST GROVE DRIVE, 6TH LOT ON RIGHT

SUBDIVISION RIDGECREST BLOCK / SECTION II LOT 36 LOT AREA 1.099 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GAD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 5-2-99
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No. Fields 1 Square Feet EA TO 1200 Linear Feet 200
No Lines FOUR Trench Width 24" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: PPBPS GRAVITY
Repair System Description: LOW PRESSURE PIPE
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth SAND 6" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

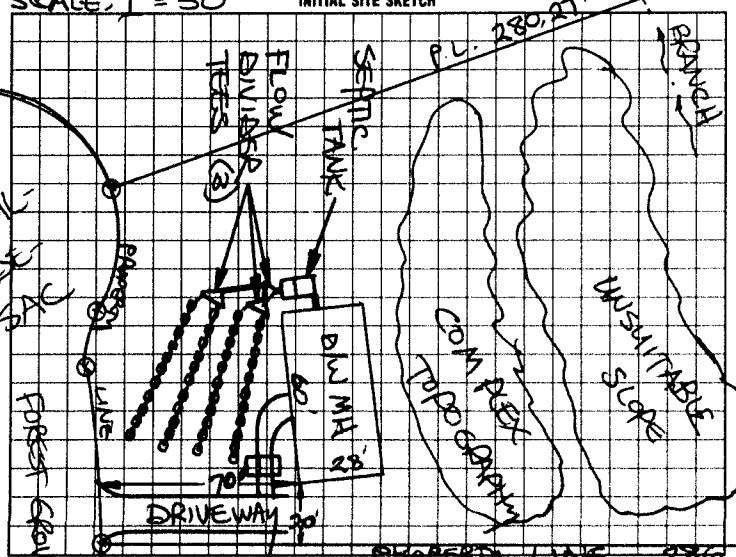
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: ① INSTALL FORTY-FOUR PPBPS PANELS IN FOUR EQUAL LENGTH LINES AS SHOWN ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR 50' LINES.

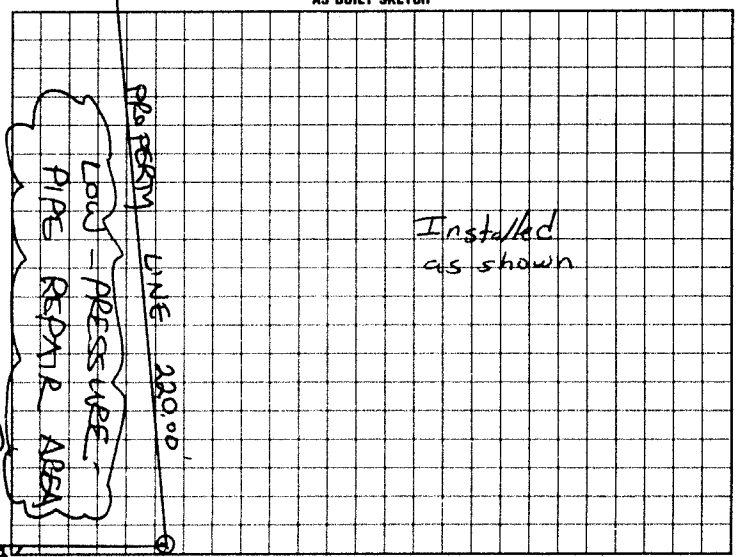
Comments/Conditions:

SCALE: 1" = 50'

INITIAL SITE SKETCH



AS BUILT 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 ____ Installed by A-1 Backhoe

Improvement Permit by: STEVE HEDRICK date 9-5-98 Operation Permit by: [illegible] date 6-28-99

Authorization to Construct by: STEVE HEDRICK date 9-5-98 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