IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

SITE PLAN WORKSHEET

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT*!!!

Place an (X) beside each item as you complete the site plan:

__✓__ Property Line measurements are clearly identified... __✓__ All proposed structures are indicated...

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

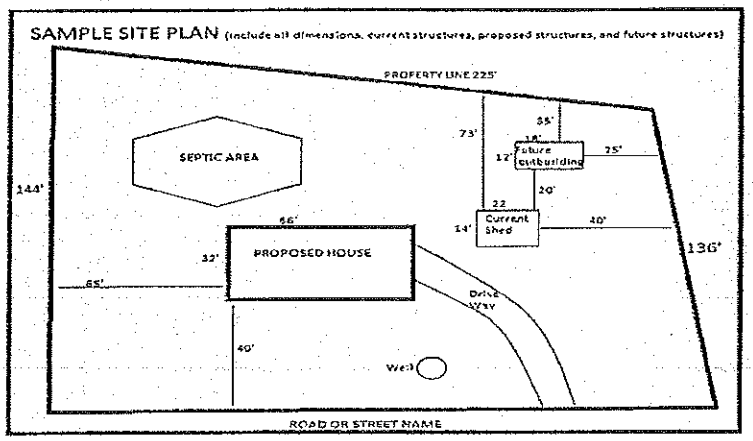
__✓__ Front and side setbacks from property line... ____ Preferred driveway location and configuration, preferred well location...

____ Area you prefer your septic system to be placed... ____ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

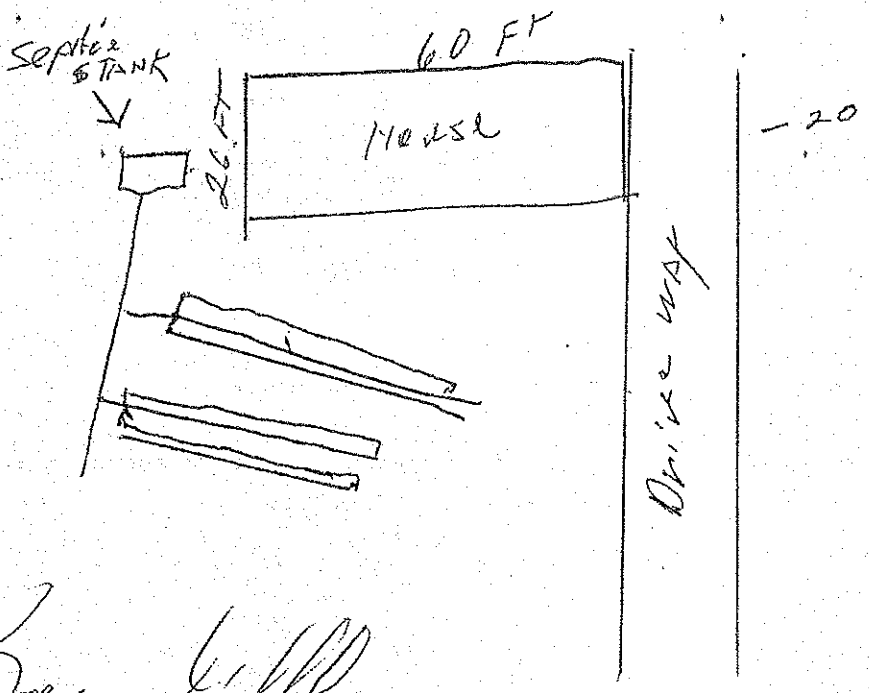
____ Location of septic systems and wells within 100' of your property... N/A

____ Location of easements and rights of ways on your property... N/A __//__ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN

B PERMIT 075723



Signature: _____

REQUIRED property owner or owner's legal representative signature.

7-25-15

DATE

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 GPD/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 840 TO 1200 Linear Feet 200
No. Lines FOUR Trench Width 24" Max. Trench Bottom Depth 36" Gravel Depth SAND FILL

(✓) New System ( ) Repair System Type: I II (III) IV V
System Description: PPBPS GRAVITY
Repair System Description: LOW PRESSURE PIPE
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 w/o plumbing

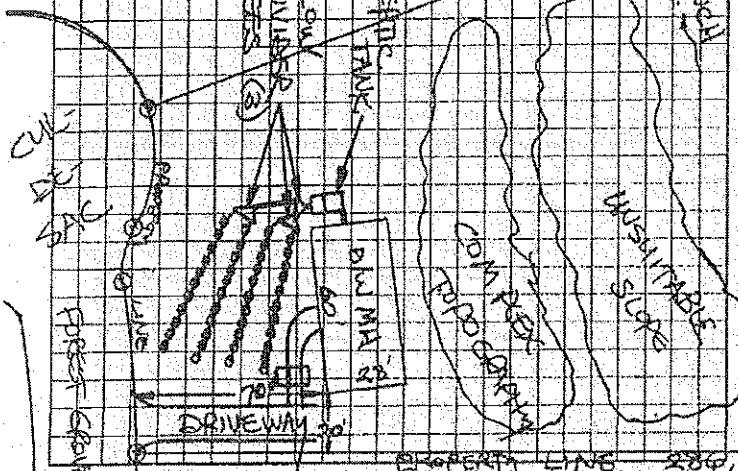
Water Supply: ( ) Individual (✓) Public ( ) Community

Comments/Conditions: ① INSTALL FORM-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

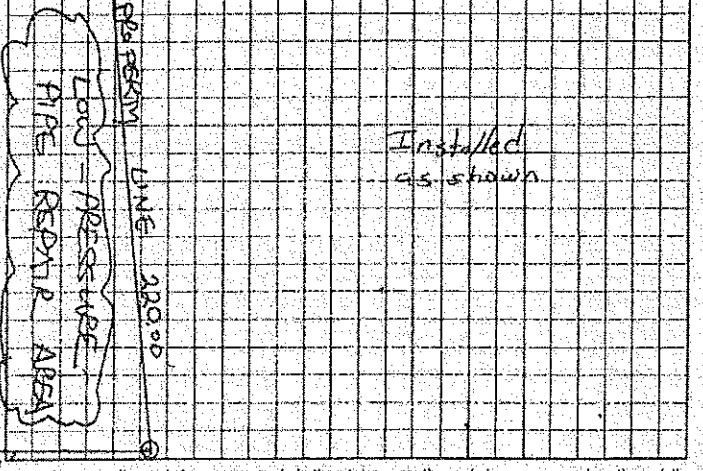
Comments/Conditions:

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.

Signature date

Improvement Permit by: STEVE HEDRICK date 9-5-98

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

Installed by A-1 Backhoe

Operation Permit by Mac Outlaws date 6-28-99

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