IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 pd 1730 MOORESVILLE 704-664-5281

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

PERMIT# 124692 PIN# 4738-59-7074 4074 DATE 11-17-04

OWNER OR CONTRACTOR HOPE BROTHERS BUILDERS INC. PHONE: Business (704) 872-4111 Home

ADDRESS 601 BOND ST STATESVILLE 28677

LOCATION 2 IN TL FT DOBBS TR CHIPLEY FORD TL RIVER RUN TR SOUTH YADKIN RIVER RD LOT ON RT AT END

SUBDIVISION RIVER RUN BLOCK / SECTION III LOT 39 LOT AREA 0.545 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 gpd/ft²

Septic Tank: 1000 Gallons; STB 312 Date 5-10-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines 5 Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: LP PANEL 50% RED
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

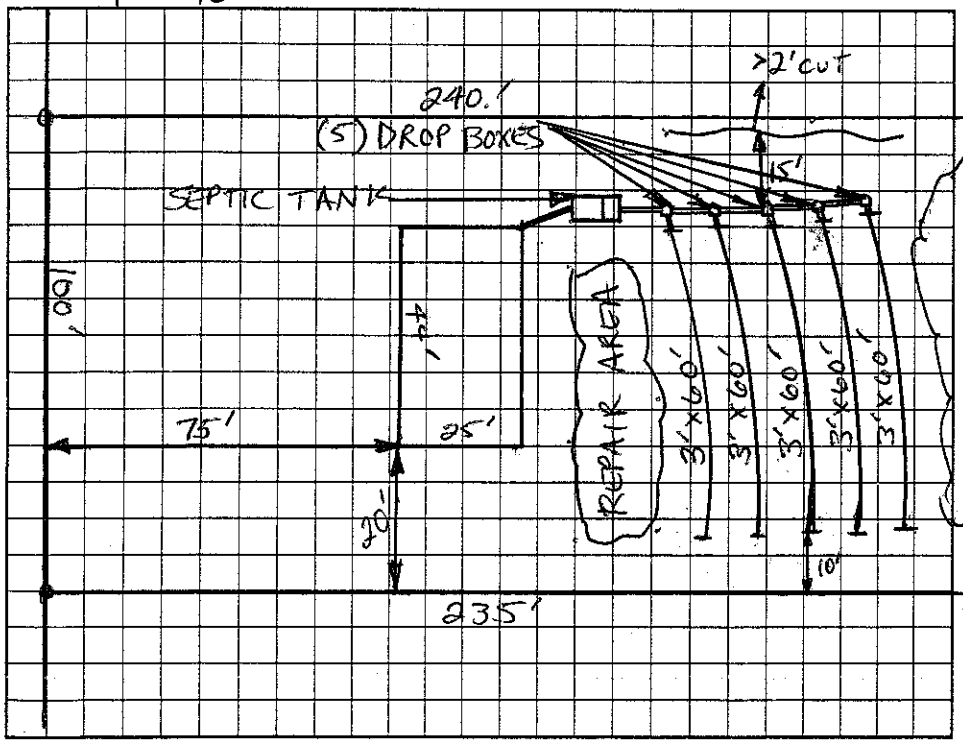
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: ① INSTALL 28" ON CONTOUR
② MAINTAIN SETBACKS

Comments/Conditions: Tank with marker & e-z set risers.
Label filter installed.
EZ flow installed as sketched.

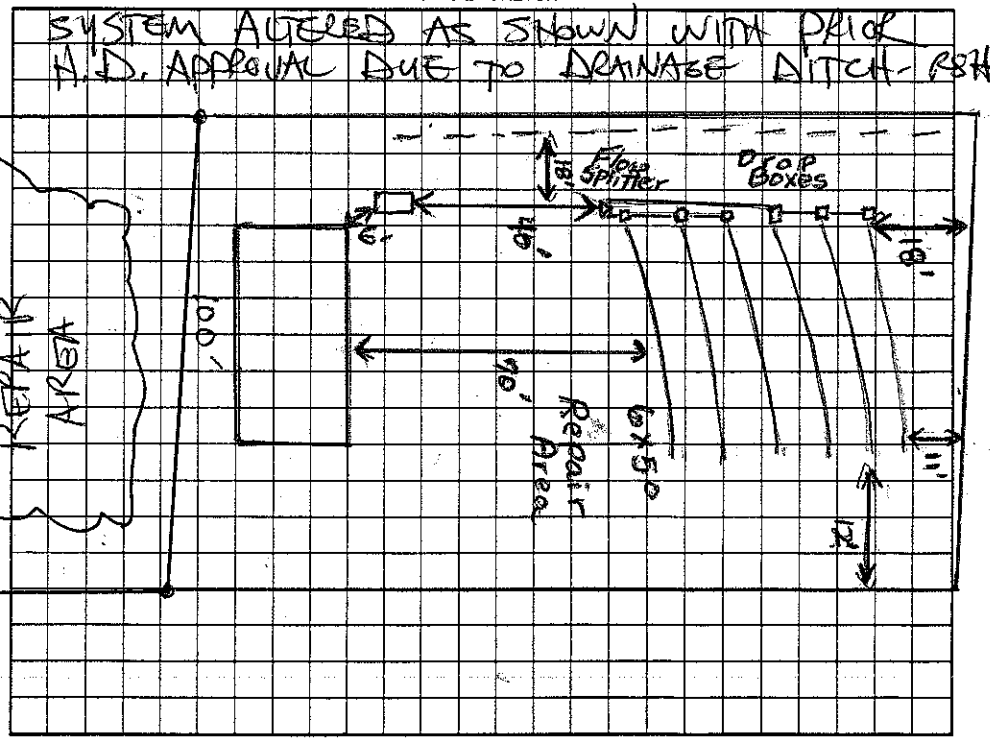
1" = 40'

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM ALTERED AS SHOWN WITH PRIOR H.D. APPROVAL DUE TO DRAINAGE DITCH - R&H



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: James Hudler

Improvement Permit by: [signature] RS date 11-17-04 Operation Permit by: Judy Melville TW date 6-29-05

Authorization to Construct by: [signature] RS date 11-18-04 Existing System Inspection by: ____ date ____

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