IREDELL COUNTY HEALTH DEPARTMENT

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

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

(c1)

PERMIT# 103513 PIN# 4749-03-1519 DATE 5-3-02

OWNER OR CONTRACTOR UNITED PROPERTIES GROUP, LLC PHONE: Business 704-400-1761 Home 704-876-3289

ADDRESS 6805 MORRISON BLVD SUITE 370, CHARLOTTE, NC 28212

LOCATION NC115N, TR S. CHIPLEY FORD RD, TR SNOW CREEK RD, TL STAGE COACH LANE, BEAR (R) TO POND

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 75.41 ACRES SITE CLASS PS DESIGN FLOW 100 L.T.A.R. 0.10 GPD/FT²

Septic Tank: 1000 Gallons: STB 794 Date 10-1-01
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No _____
Nitrification Field: No Fields 1 Square Feet 1000 Linear Feet 333
No Lines THREE Trench Width 36" Max Trench Bottom Depth 28"

☑ New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth 12" ☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home No. Bedrooms —
☐ Mobile Home No. Bathrooms 1
☐ Business No. Employees ___
☐ Other PICNIC SHELTER

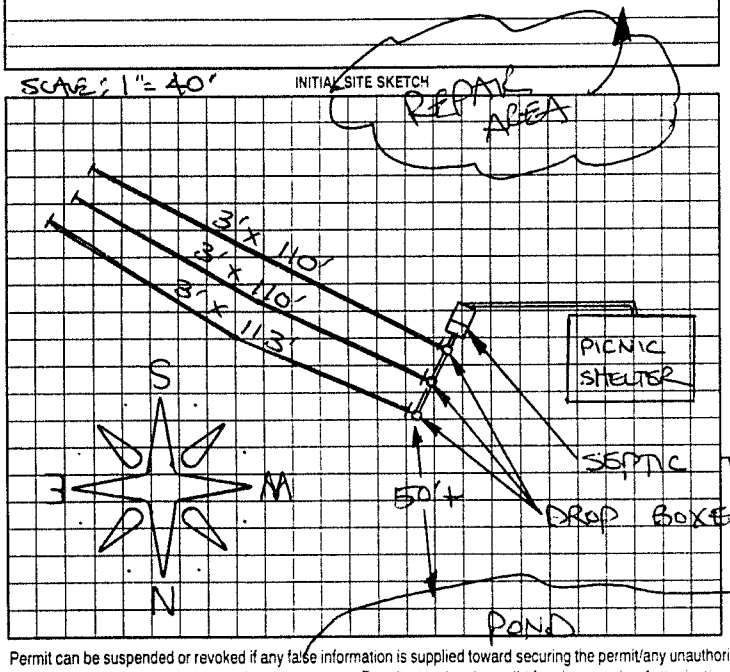
Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments:/Conditions:

Comments:/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK" FILTER

SCALE: 1" = 40'

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE SKETCH

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 5/3/2 Installed by: KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 5-3-02 Operation Permit by: STEVE HEDRICK date 5-6-02

Authorization to Construct by: STEVE HEDRICK date 5-3-02 Existing System Inspection by: _____ date _____

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