IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 155.00 Paid MOORESVILLE 704-664-5281

330

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

PERMIT# 021259 PIN# 4740-20-3493 pt. DATE July 17, 02

OWNER OR CONTRACTOR AH Inc // Pilot Homes PHONE: Business _____ Home _____

ADDRESS 1281 E. Garner Bagnal Blvd. Statesville NC 28677

LOCATION Perth Rd N/J TR Clontz Hill JR Ridge Creek TR Wiltshire TR Panther Creek on left near end

SUBDIVISION Wiltshire Creek BLOCK / SECTION _____ LOT 23 Revised LOT AREA 1.56 Ac SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 825 Date 6/28/02

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 400/600 Linear Feet 200

No Lines 4@50' Trench Width 24" min 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ Yes ☑ No initially

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

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

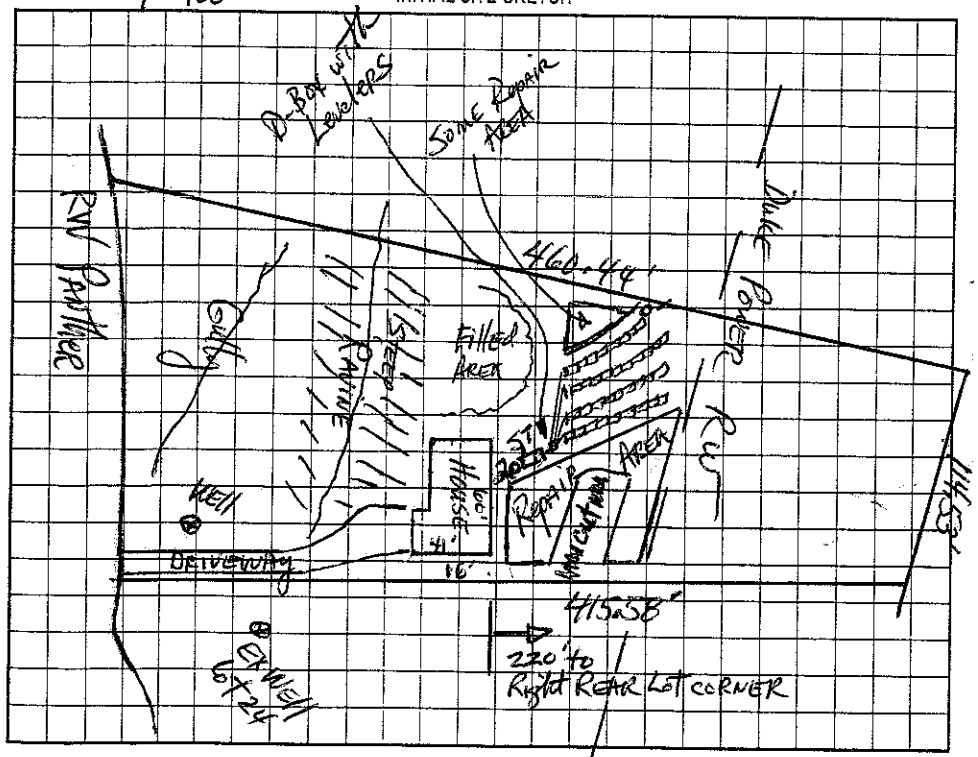
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments/Conditions: Plumbing must Exit house within 6" of Existing ground level or use of a pump may be Required.

Comments/Conditions: 2 OR Elevated Slab PPBPS

1"=100'

INITIAL SITE SKETCH



AS BUILT SKETCH

Duke Power R/W encroachment

System Abandoned

See new permit

dated 7-30-08

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 7/18/02 Installed by: Rowan Septic Tank

Improvement Permit by: Mark R Hanson IRS date 7-17-02 Operation Permit by: Wesley Sparks RS date 9/4/02

Authorization to Construct by: Mark R Hanson IRS date 7-17-02 Existing System Inspection by: _____ date _____

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