IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☒ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT (I) / OPERATION PERMIT (O) / EXISTING SYSTEM INSPECTION (E)

PERMIT # 169073 PIN # 4741-13-9585 DATE 11-1-11

OWNER Edwin Colon APPLICANT: Freedom Homes PHONE: Home/Cell # 704-883-6148 Business #

SITE ADDRESS 121 Pine State OWNER / APPLICANT ADDRESS 419 Skyuka Rd

SITE DIRECTIONS Hwy 15/21S through Troutman (R) on Pine State, 3rd lot on left

SUBDIVISION n/a BLOCK / SECTION n/a LOT # n/a LOT AREA .59 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank 1000 Gallons: STB 760 Date 6-7-11
Pump Tank ____ Gallons: P T ____ Date ____
Pump Make ____ Model ____ Serial # ____
No. Nitrification Fields: 1 No. Lines 6 Linear Feet 360
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth 36"

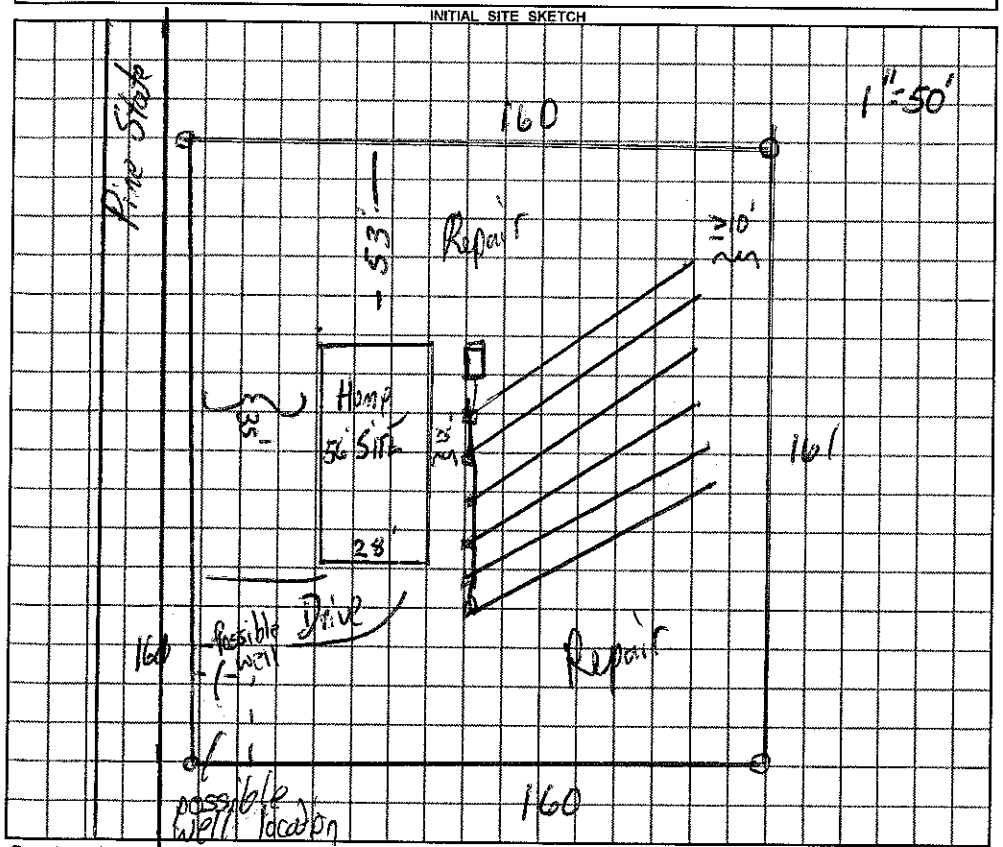
☒ New System ☐ Repair ☐ Expansion System Type I II (III) IV V VI
System Description: 25% Reduction Gravity
Repair System Description: 50% Reduction LP
Maintenance Agreement Required ☐ YES ☒ NO
☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3
☐ Business No. Persons ____
☐ Other No. Employees ____
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions
(6) 3'x60'

INITIAL SITE SKETCH



AS BUILT 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 ~~plat valid without expiration.~~ site plan valid 60 mo.* ☒ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date 11-3-11 Installed by: A-1

IMPROVEMENT PERMIT by: [signature] REHS Date 11-1-11 OPERATION PERMIT by: [signature] REHS Date 11-15-11

AUTHORIZATION TO CONSTRUCT by: [signature] REHS Date 11-1-11 Existing System Inspected by: REHS Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant