IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 18283

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

PIN # 4747399490

APPLICANT: Dixieland Inc. APPLICANT ADDRESS: 133 Redemption Road

SITE ADDRESS: 131 Trophy PHONE: 704 876 6162 ALT. PHONE:

SITE DIRECTIONS: Hwy 21 N to (L) on Jenning (L) on Trophy lot on left

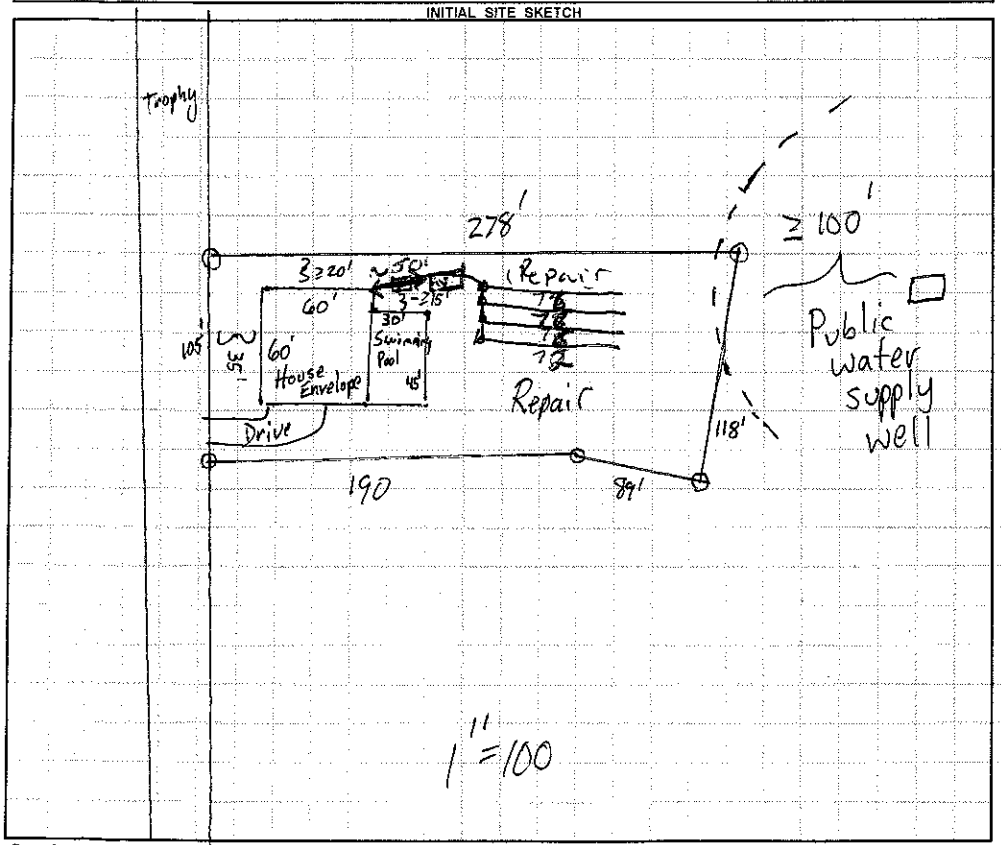
SUBDIVISION: The Reserve at Deer Crossing SECTION: LOT # 15 LOT AREA: .6569 DESIGN FLOW: 360 L.T.A.R.: .3

Septic Tank	1000 (gal)	STB	1012-1000	Date	9-30-13	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 3
Pump Tank	(gal)	PT		Date		System Description:	25% Reduction - Gravity	☐ Business	No. Persons
Pump Make		Model		Serial #		Repair System Description:	25% Reduction - Pump	☐ Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft:	300	Maintenance Agreement Required:	☐ YES ☒ NO	☐ Slab	☒ Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	n/a	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

- Yellow tuffstite filter installed
- 2" PVC tank marker installed

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Regenie C Darnell Date: 10/22/2013 Installed by: Steve Jordan

IMPROVEMENT PERMIT by: James Date: 10-4-13 OPERATION PERMIT by: Justin Henderson Date: 4-4-14

AUTHORIZATION TO CONSTRUCT by: James Date: 10-4-13 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK