IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 104869 PIN# 4749 68 0439 DATE 2-26-02

OWNER OR CONTRACTOR CARDINAL LEASING PHONE: Business 704-873-1014 Home

ADDRESS 138 CON-LEE DR. OLIN NC 28660

LOCATION US 21 N, TL JENNINGS RD, TL RAIDER ROAD, TR CON-LEE ~~DRIVE~~, 6th LOT ON RIGHT

SUBDIVISION CON-LEE HEIGHTS BLOCK / SECTION LOT 9 LOT AREA 100' x 200' SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons. STB 1012 Date 10-8-01
Pump Tank: Gallons. PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines EIGHT Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

✓ New System ☐ Repair System Type I II III IV V VI
System Description: CONVENTIONAL GRAVITY
Repair System Description 50% REDUCTION, PUMP
Maintenance Agreement Required: ☐ Yes ✓ No

☐ House/Mod. Home ✓ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

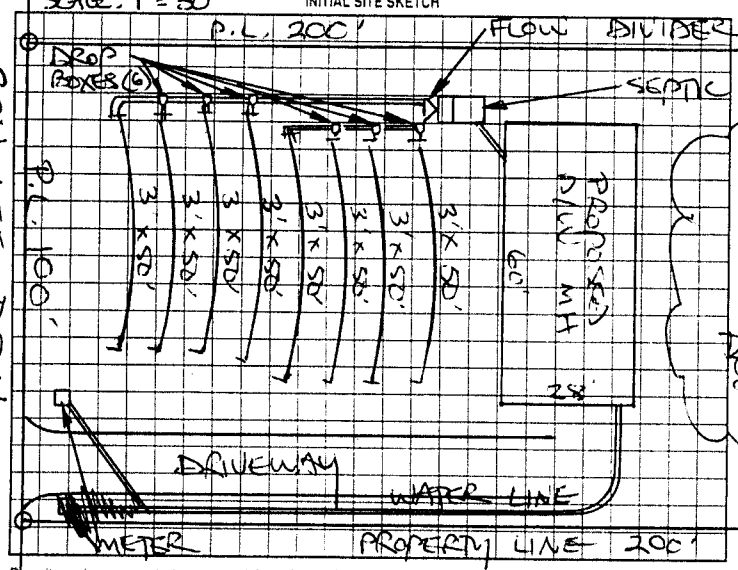
Water Supply: ☐ Individual ✓ Public ☐ Community

Comments/Conditions:

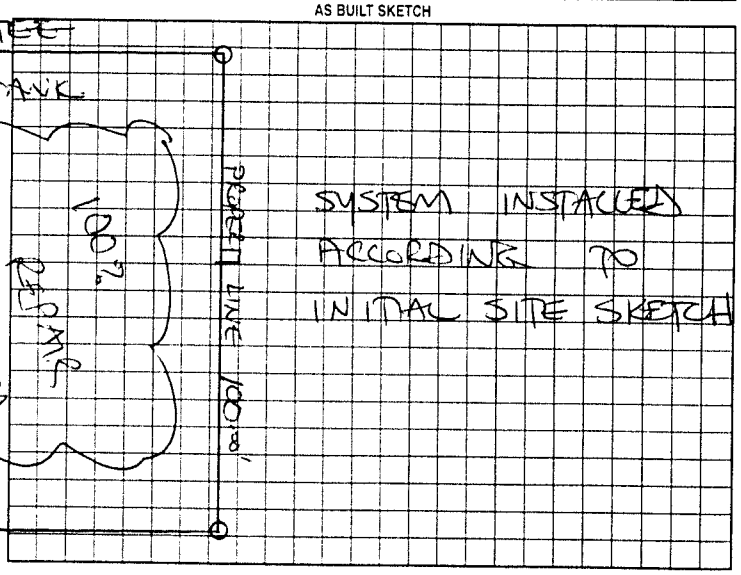
Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "POLY LOK" FILTER

SCALE: 1" = 30'

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 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: [signature] date 2-26-02 Installed by: MITCHELL GRADING

Improvement Permit by: STEVE HENDRICK date 2-26-02 Operation Permit by: STEVE HENDRICK date 4-2-02

Authorization to Construct by: STEVE HENDRICK date 2-26-02 Existing System Inspection by: date

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