IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 152258 PIN# 4750671671.000 4750-68-8020 DATE 8-21-08

OWNER OR APPLICANT Paul M. Overcash PHONE: Business 980-722-5175 Home

ADDRESS PO Box 1303 Troutman NC 28166

LOCATION Shinnville, TR Weathers Creek, TL Overcash, TL Kendall, on L 183 Kendall

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA 5.3 Ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 3-25-08
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1320' Linear Feet 440'
No Lines 4@110' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: Gravity Conventional
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 2 No. Persons No. Employees

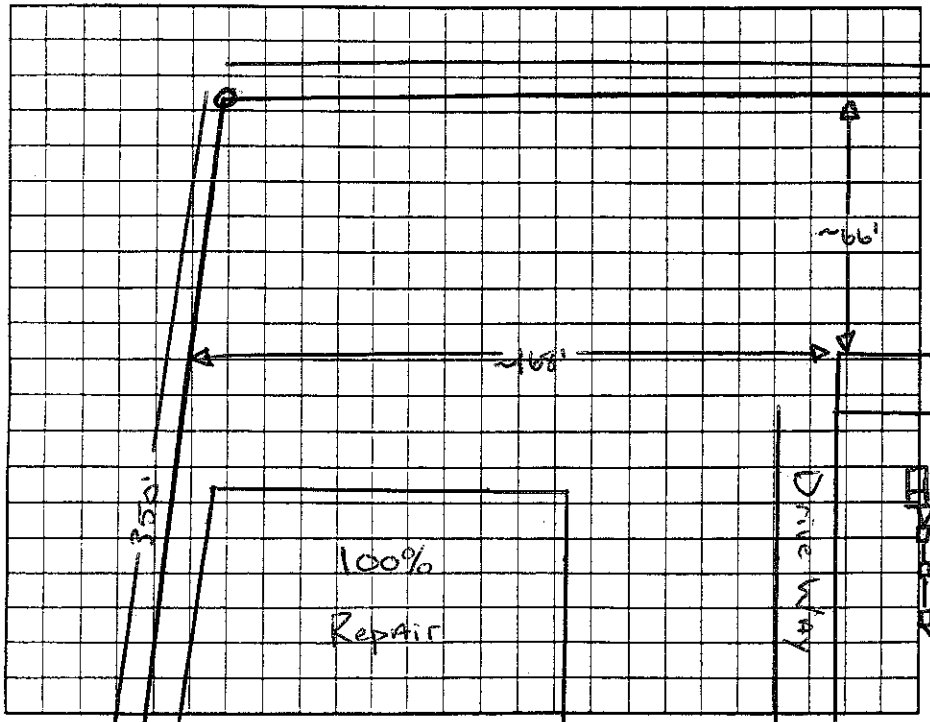
Water Supply: ☒ Individual ☐ Public ☐ Community

☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

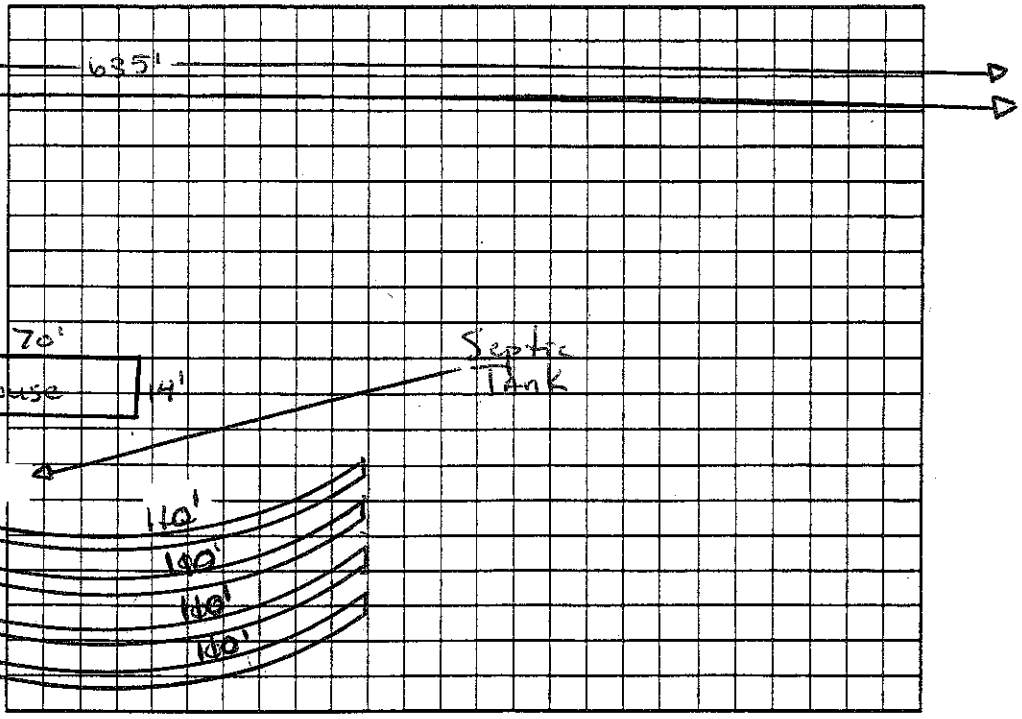
Comments:/Conditions: 1) Tank + drain lines must be 5' from house 2) Install drain lines on contour 3) House is 2 bedrooms but installing 3 bedroom system for future use

Comments:/Conditions:

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: Paul M. Overcash date 8-26-08 Installed by: Craig Thompson

Improvement Permit by: JB-A date 8-21-08 Operation Permit by: JB-A date 9-3-08

Authorization to Construct by: JB-A date 8-21-08 Existing System Inspection by: date

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