2:30

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

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

PERMIT # 46395 PIN # ~~4750-70-9907~~ 4750709831 DATE 3-9-12

OWNER ADAMS HOMES APPLICANT: MIKE ATHANAS PHONE: Home/Cell # 704-947-6118 Business #

SITE ADDRESS 164 MILLS PLANTATION CR. OWNER / APPLICANT ADDRESS 10115 KINLEY AVE #160 HUNTERSVILLE

SITE DIRECTIONS 115 N TR SHEPHERD, TURN LEFT HOUSTON, TL GA MILLS, TL, ON R

SUBDIVISION GA MILLS BLOCK / SECTION LOT # 44 LOT AREA 36,300 SQFT DESIGN FLOW 480 L.T.A.R. .3

Septic Tank 1000 Gallons: STB 825 Date 3-2-12

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

No. Nitrification Fields: 1 No. Lines 4 Linear Feet 400'

Trench Width 36" Max. Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type I II (III) IV V VI

System Description: GRAVITY 25%

Repair System Description: PPRPS

Maintenance Agreement Required ☐ YES ☒ NO

Gravel Depth — ☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 4

☐ Business No. Persons ____

☐ Other No. Employees ____

☒ Slab ☐ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply

☒ ~~Private~~

☐ Public

☐ Community

Comments / Conditions: (1) FOLLOW ATTACHED PLAN

INITIAL SITE SKETCH

* SEE PLAN BY MIKE ATHANAS APPROVED BY ICHD

AS BUILT SKETCH

INSTALLED AS DRAWN

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 4/11/12

IMPROVEMENT PERMIT by: [signature] REHS Date 4-10-12

AUTHORIZATION TO CONSTRUCT by: [signature] REHS Date 4-10-12

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

Installed by: ROMAN SEPTIC

OPERATION PERMIT by: [signature] REHS Date 6-28-12

Existing System Inspected by: ____ REHS Date ____

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