IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 $57 11:30 MOORESVILLE 704-664-5281

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

PERMIT# 067820 PIN# 4750984243 DATE 7/28/2000

OWNER OR CONTRACTOR Dan West / DT Builders PHONE: Business 622-0017 Home

ADDRESS 16216 Walcot Ln. Cornelius, NC 28031

LOCATION Shinnville Rd TL Weathers Creek TL Pheasant Run 2nd lot on left

SUBDIVISION Pheasant Run BLOCK / SECTION III LOT 40 LOT AREA .89 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 9/12/000
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet *900 Linear Feet 300
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction *
Repair System Description: Pump - Innovative
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 3
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

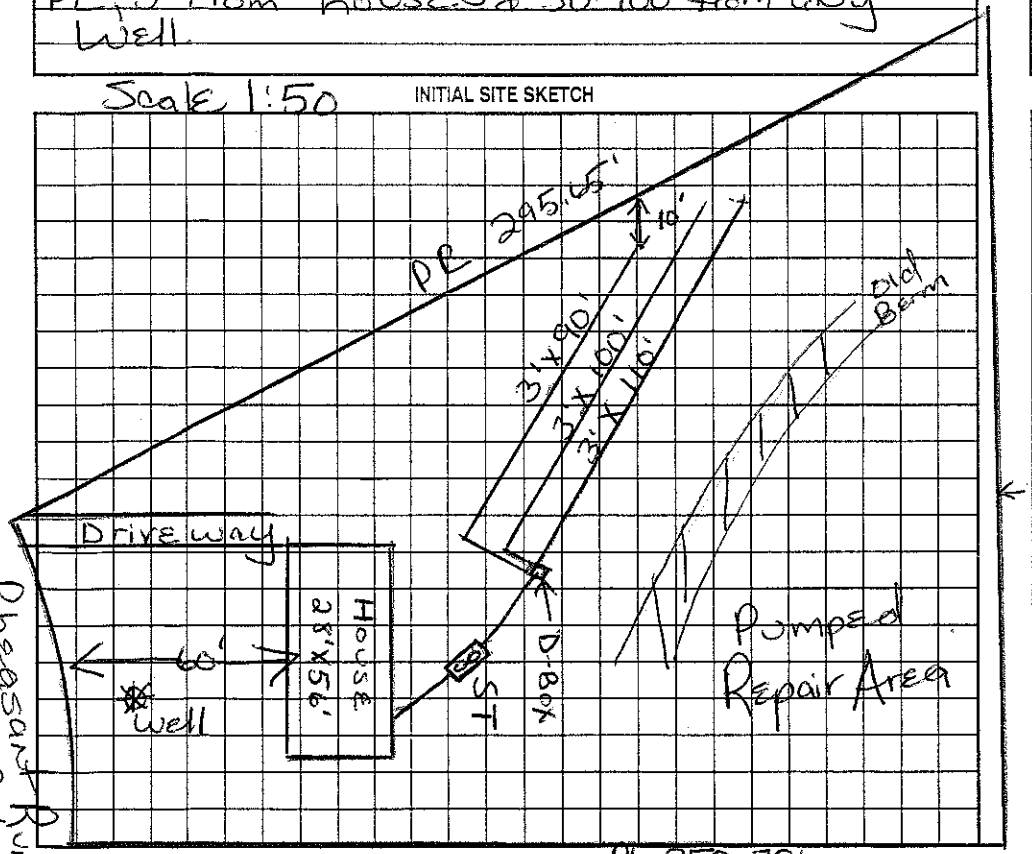
Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions: Keep Septic System at least 10' from PL, 5' from house & 50-100' from any well.

Comments:/Conditions: * 25% Reduction in Drainfield area. Must have fall btw Septic Tank & Drainfield. EZ Flow Installed

INITIAL SITE SKETCH

Scale 1:50



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 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: X [signature] date 8/17/00 Installed by: Statesville Backhoe

Improvement Permit by: Maria H. Dotson R.S. date 7/28/2000 Operation Permit by: [signature] RSI date 2/2/01

Authorization to Construct by: Maria H. Dotson R.S. date 7/28/2000 Existing System Inspection by: date

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

IREDELL COUNTY HEALTH DEPARTMENT

Northern Construct

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

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTI

PROPERTY DESCRIPTION NO. 067820 DATE 7/14/97 TAX MAP NO. 4750984243 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR Mel Graham PHONE: Business 663-6905 Home

ADDRESS 6100 Fairview Rd. Suite 810

LOCATION Sheynolds Rd, TL Weathers Creek Rd. TL Pheasant Run Rd. to 2nd lot on (L)

SUBDIVISION Pheasant Run BLOCK / SECTION III LOT 40 LOT AREA .89 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900± Linear Feet 300±

No Lines 3 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth SAND

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

System Description: Ch PLASTIC - Pipe Manifold

Repair System Description: Some

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

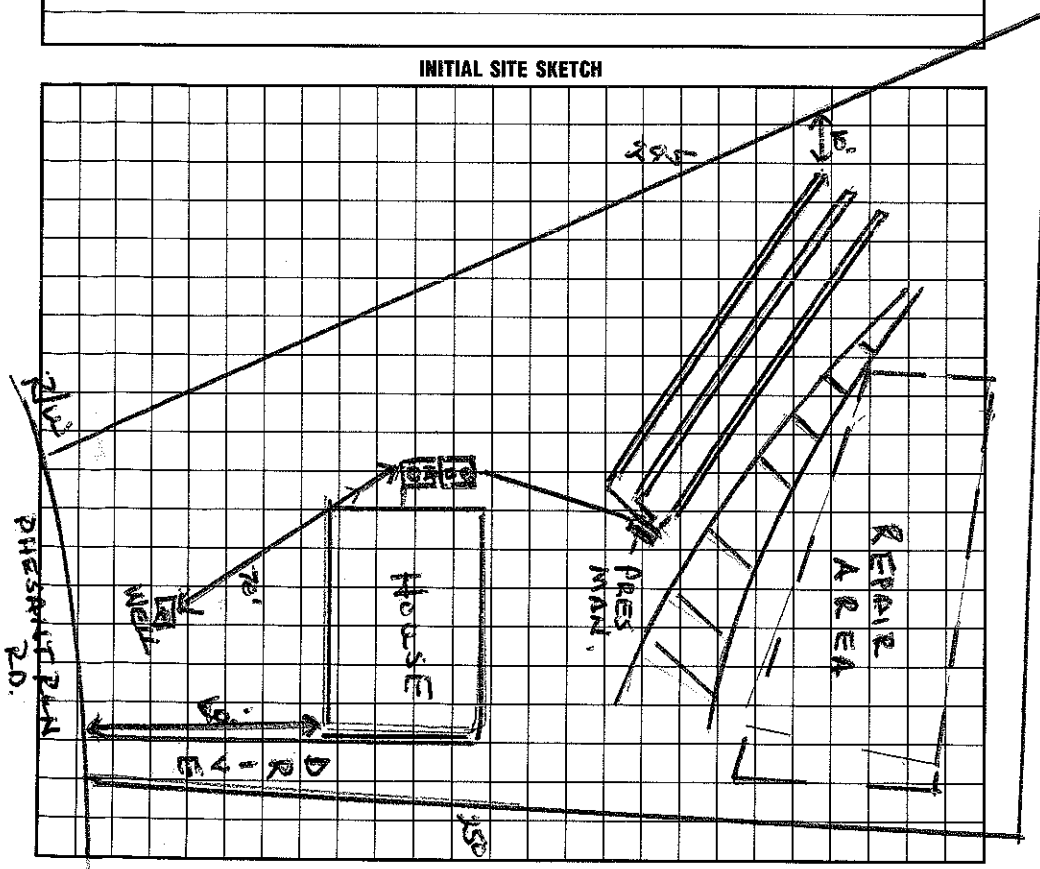
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☒ Individual
☐ Community
☐ Public

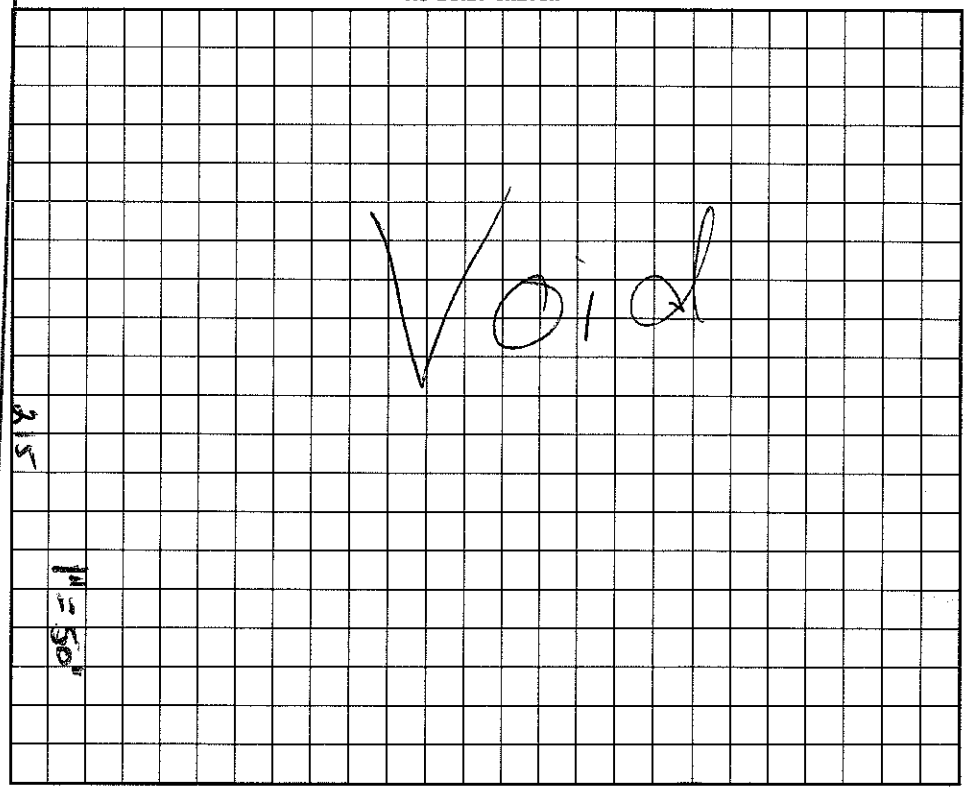
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance.

Signed: ✱ Tracy C. Parker, REHS 7/24/97 agnt

Improvement Permit by: Wesley Sparks R.S. date 7/14/97

Existing System Inspection by: Wesley Sparks R.S. date 7/14/97

Installed by:

Certificate of Completion by: date

Operation Permit by: date

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