IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089354 PIN# 4757352459 (pt) DATE July 7, 2000

OWNER OR CONTRACTOR Dixieland INC. PHONE: Business _____ Home _____

ADDRESS 4474 LAKE Dr. Sherrills Ford N.C. 28673

LOCATION 21 N TL Bethany Rd. TR Island TR BEREA TL Rt Zion AT end ON Right

SUBDIVISION Bethany Trace BLOCK / SECTION II LOT 41 LOT AREA .76 SITE CLASS RS DESIGN FLOW 360gpd L.T.A.R. .33

Septic Tank: 1080 Gallons; STB 825 Date 6/19/00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III IV V VI
System Description: Gravity Conventional
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

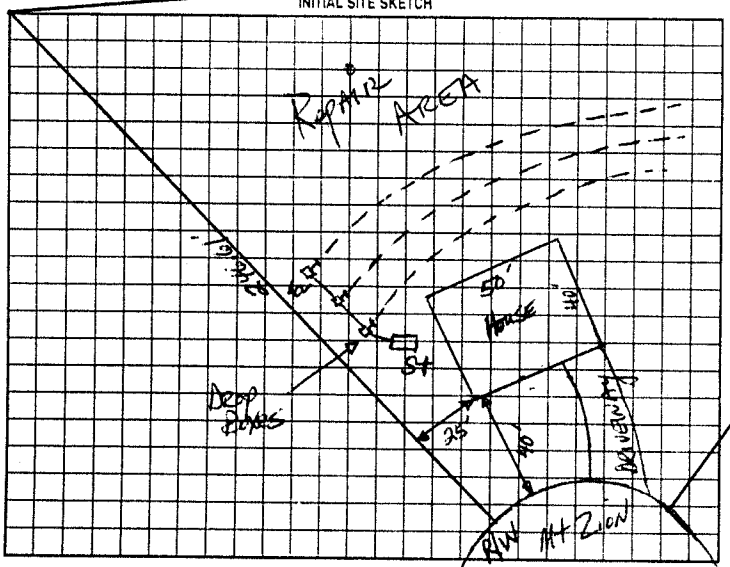
☑ House/Mod Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply:
☐ Individual
☑ Public
☐ Community

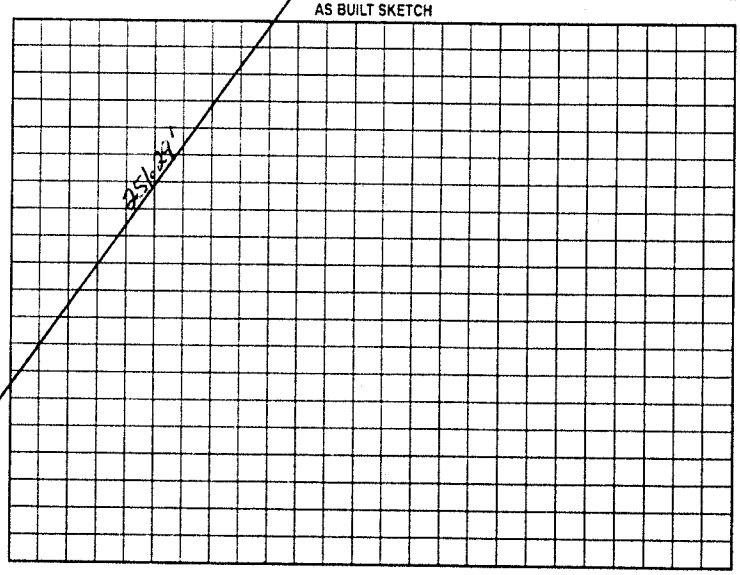
Comments:/Conditions: Install Laterals 30-36" trench bottom depth.

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: Regina K. Gaffie date 7/10/2000 Installed by: Rowan Septic

Improvement Permit by: _____ date 7-7-2000 Operation Permit by: _____ R.S.I. date 9/7/00

Authorization to Construct by: _____ date 7-7-2000 Existing System Inspection by: _____ date _____

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