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 # Repair PIN # 4760761662 DATE 3/20/2012

OWNER Rex Edmonds APPLICANT: Same PHONE: Home/Cell # 7045283436 Business # 7045060322

SITE ADDRESS 154 Strawberry Hill Ln OWNER / APPLICANT ADDRESS Same

SITE DIRECTIONS Shinnville Rd to Brawley TR Strawberry Hill near end on right.

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 7.0 Acre DESIGN FLOW 360gpd L.T.A.R. .3

Existing

Septic Tank 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

No. Nitrification Fields: 1 No. Lines 3 Linear Feet 200Ft

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Gravity - Conventional

Repair System Description: Gravity - 25% Reduction

Maintenance Agreement Required ☐ YES ☐ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply

☒ Private

☐ Public

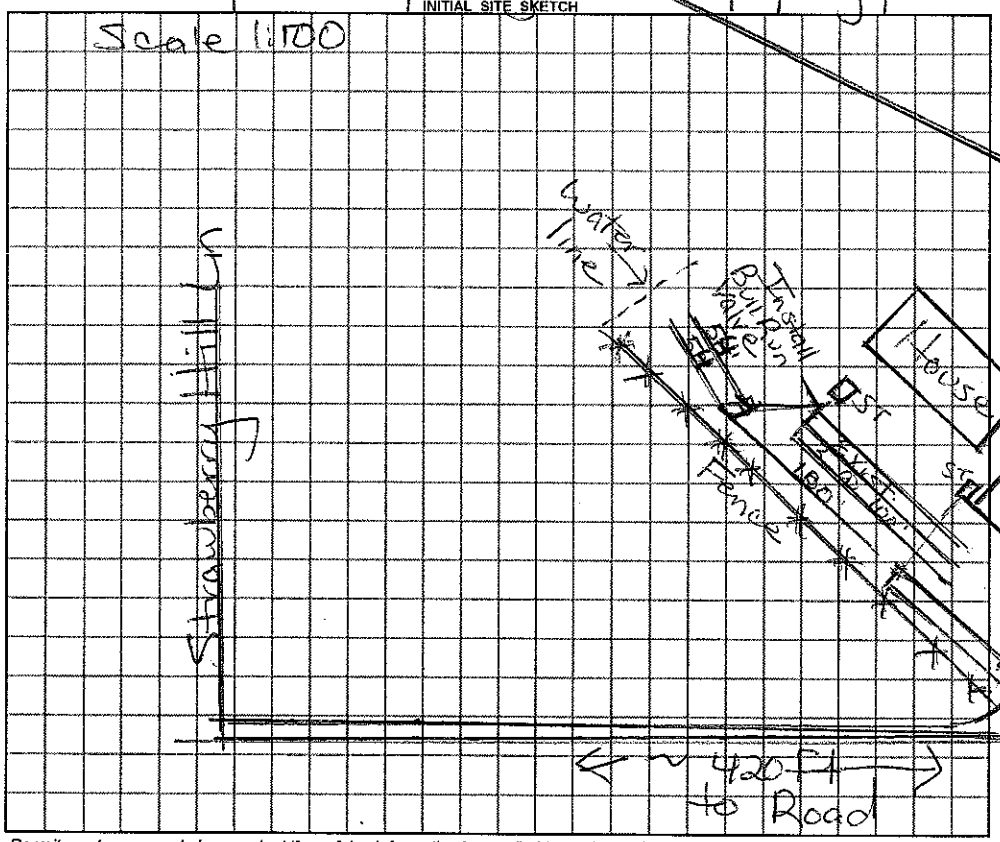
☐ Community

Comments / Conditions Install Bull Run Valve, outside ST & 200Ft Drainline (1-100ft line 2@50ft) Serial Distribution or Flow Dividers (*Note: 2 Separate Septic Systems on property)

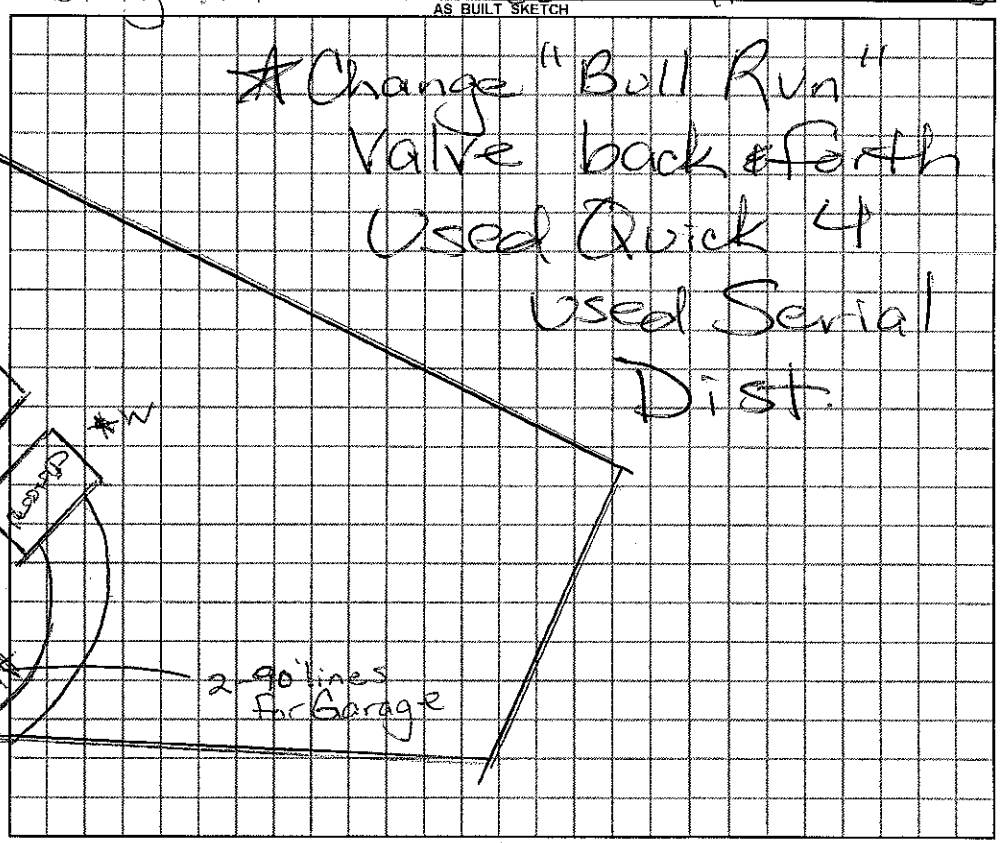
*Keep at least 10Ft from Old Existing House Drainfield, also at least 10Ft from Septic System for Garage. Stay 10Ft from Water line

INITIAL SITE SKETCH

Scale 1:100



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 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: Angela W Edmonds Date 3/21/12 Installed by: Wayne Orpison Construction

IMPROVEMENT PERMIT by: Maria Hill Cox REHS Date 3/20/12 OPERATION PERMIT by: Maria Hill Cox REHS Date 3/21/12

AUTHORIZATION TO CONSTRUCT by: Maria Hill Cox REHS Date 3/20/12 Existing System Inspected by: REHS Date

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

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

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 09793 PIN# 4760761662 DATE 2-15-20

OWNER OR CONTRACTOR Rex Edmonds PHONE: Business _____ Home 528-3436

ADDRESS 154 Strawberry Hill Ln Cleveland NC 27013

LOCATION Shinnville TC Brawley TR Strawberry Hill near end

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. PSJ DESIGN FLOW 170gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 1-11-20 ☒ New System ☐ Repair System Type: I. II. III. IV. V. VI

Pump Tank: _____ Gallons; PT _____ Date _____ System Description: Gravity-Conventional

Pump Make: _____ Model _____ Serial No. _____ Repair System Description: _____

Nitrification Field: No Fields 1 Square Feet 540' Linear Feet 180 Maintenance Agreement Required: ☐ Yes ☐ No

No Lines 2@90'ea Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12" ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

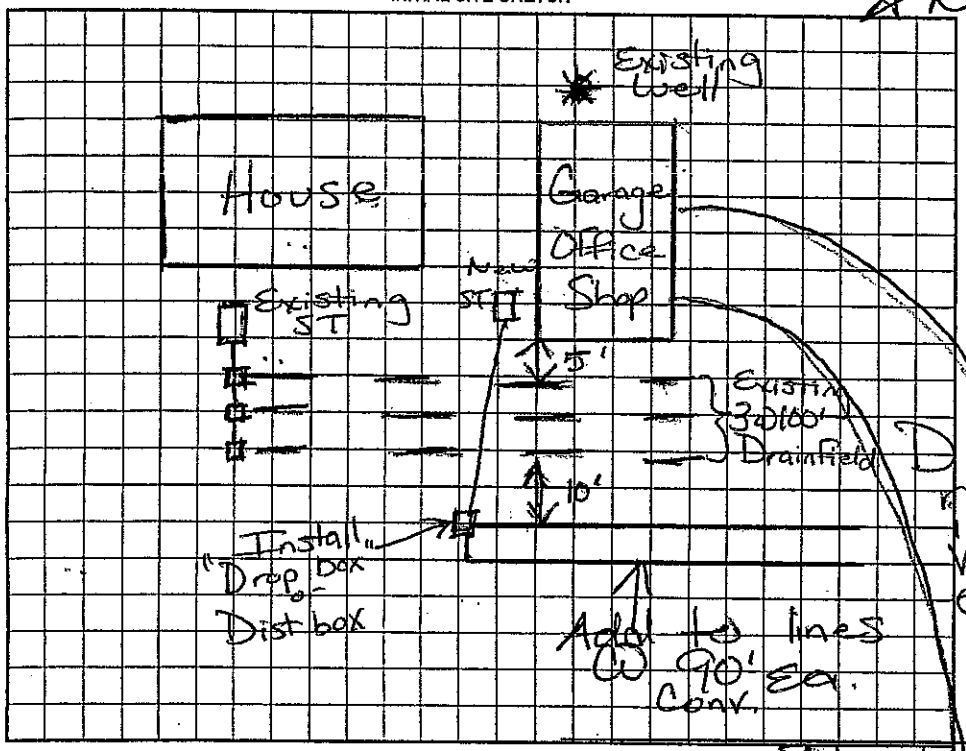
☐ House/Mod. Home No. Bedrooms ____
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☒ Other Shop

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Install New Septic tank for Shop. Solid pipe over Existing Drainfield to get to new Drainfield.

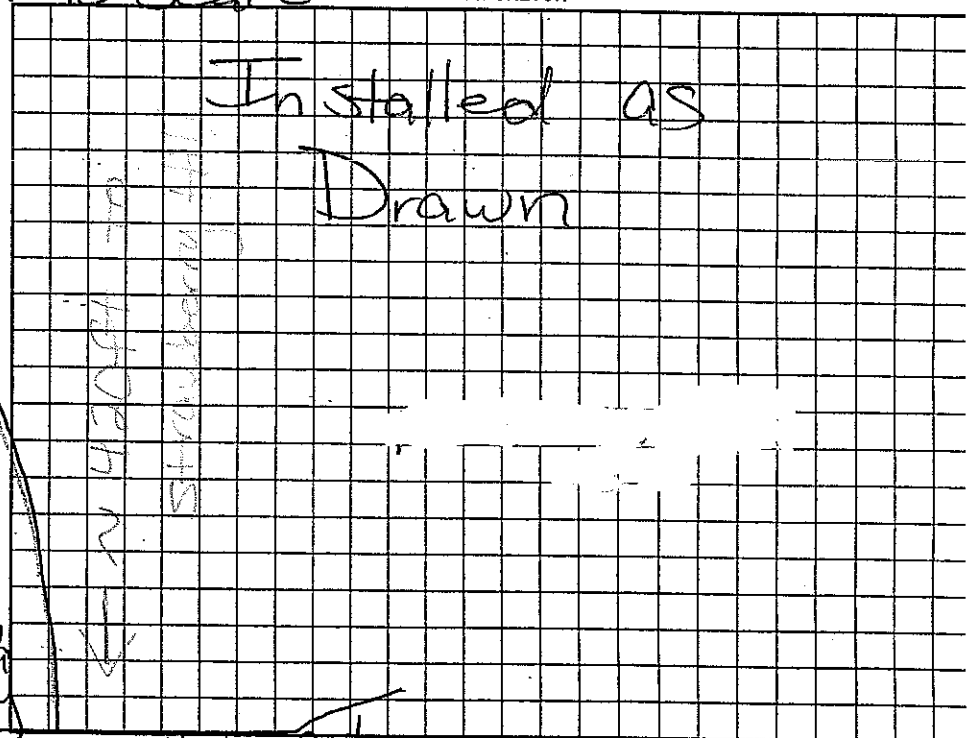
Comments:/Conditions: ☆ Must Keep Septic System at least 50' from well.

INITIAL SITE SKETCH ☆ Not to Scale



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. Improvemen 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: _____ RS date _____ Installed by: Shane Hill

Improvement Permit by: Maina H. Dotson RS date 2/15/20 Operation Permit by: Maina H. Dotson RS date 2/19

Authorization to Construct by: Maina H. Dotson RS date 2/15/20 Existing System Inspection by: _____ date _____

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