CF 11'-105'

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 100780 PIN# 4765 93 7795.5 DATE 6-19-01

OWNER OR CONTRACTOR A H INC PHONE: Business 704-855-2300 Home

ADDRESS 450 AUCTION DRIVE, SALISBURY, NC 28147

LOCATION HWY 64E, @ TRIPLE OAKS RD, AT END OF CUL-DE-SAC

SUBDIVISION TRIPLE OAKS BLOCK / SECTION LOT 5 LOT AREA 1.53 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons: STB 825 Date 7-10-01
Pump Tank: 1000 Gallons; PT 302 Date 7-13-01
Pump Make: ZOELLER Model N137-C Serial No. 137-0002
Nitrification Field: No Fields 1 Square Feet EQ=1440' Linear Feet 240'
No Lines 7 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth SAND

X New System ☐ Repair System Type: I. II. (III.) IV. V. VI
System Description: PUMP PANEL
Repair System Description: LP PANEL
Maintenance Agreement Required: ☐ Yes X No

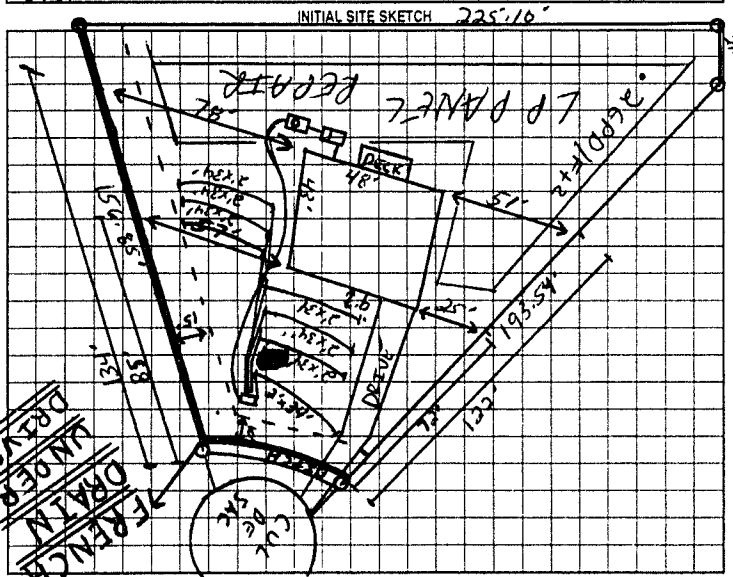
X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

Water Supply: ☐ Individual X Public ☐ Community

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

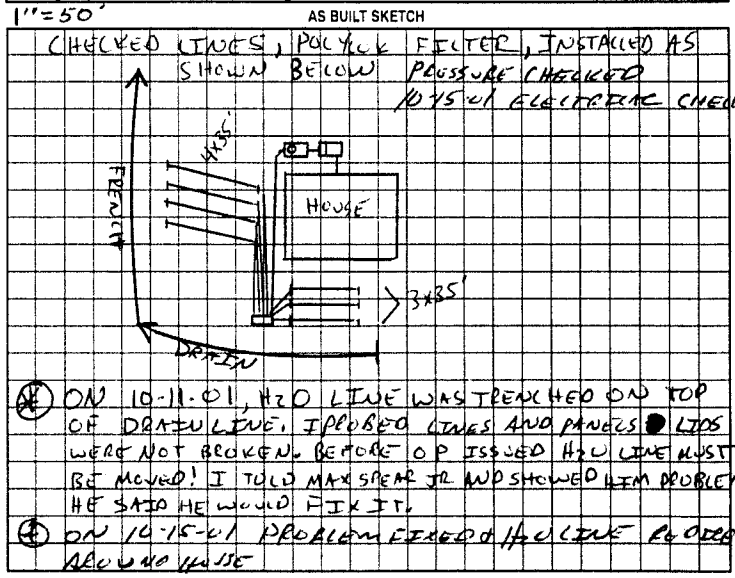
Comments/Conditions: ① USE Pressure Manifold ② MAINTAIN SETBACKS, ESPECIALLY OFF FRENCH DRAIN ③ INSTALL LINES ON CONTOUR ④ INSTALL FRENCH DRAIN 48" DEEP.

INITIAL SITE SKETCH 225'.10'



Comments/Conditions: FRENCH DRAIN INSTALLED & CHECKED DUE TO H2O LINE & ELECTRICAL LINE, FRENCH DRAIN MOVED DOWN A LITTLE SO I CAN ONLY GET 3 LINES ABOVE & ALL TO THE SIDE DUE TO SETBACKS

1"=50' AS BUILT SKETCH



④ ON 10-11-01, H2O LINE WAS TRENCHED ON TOP OF DRAIN LINE. I PROBED LINES AND PANELS ● LIDS WERE NOT BROKEN. BEFORE OP ISSUED H2O LINE MUST BE MOVED! I TOLD MAX SPEAR JR AND SHOWED HIM PROBLEM. HE SAID HE WOULD FIX IT.

④ ON 10-15-01 PROBLEM FIXED H2O LINE RELOCATED AROUND HOUSE

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: _____ date 6/19/01 Installed by: ROWAN SEPTIC

Improvement Permit by: _____ date 6-19-01 Operation Permit by: _____ date 10-15-01

Authorization to Construct by: _____ date 6-19-01 Existing System Inspection by: _____ date _____

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