IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 095350 PIN# 4768 99 ~~33~~ 3346 DATE 4/11/01

OWNER OR CONTRACTOR DENNIS GALLIHER PHONE: Business (704) 902-4015 Home (704) 539-4544

ADDRESS 3360 JENNINGS RD., UNION GROVE, NC 28689

LOCATION 21 N ® CLIFF THOMAS RD., ® CHADWICK ON ®

SUBDIVISION _____ BLOCK / SECTION _____ LOT 2 LOT AREA .67 Ac. SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. .30

Septic Tank: 1000 Gallons; STB 1012 Date 8-18-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'
No Lines 4 Trench Width 3' Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: CONVENTIONAL
Repair System Description: 25% REDUCTION
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

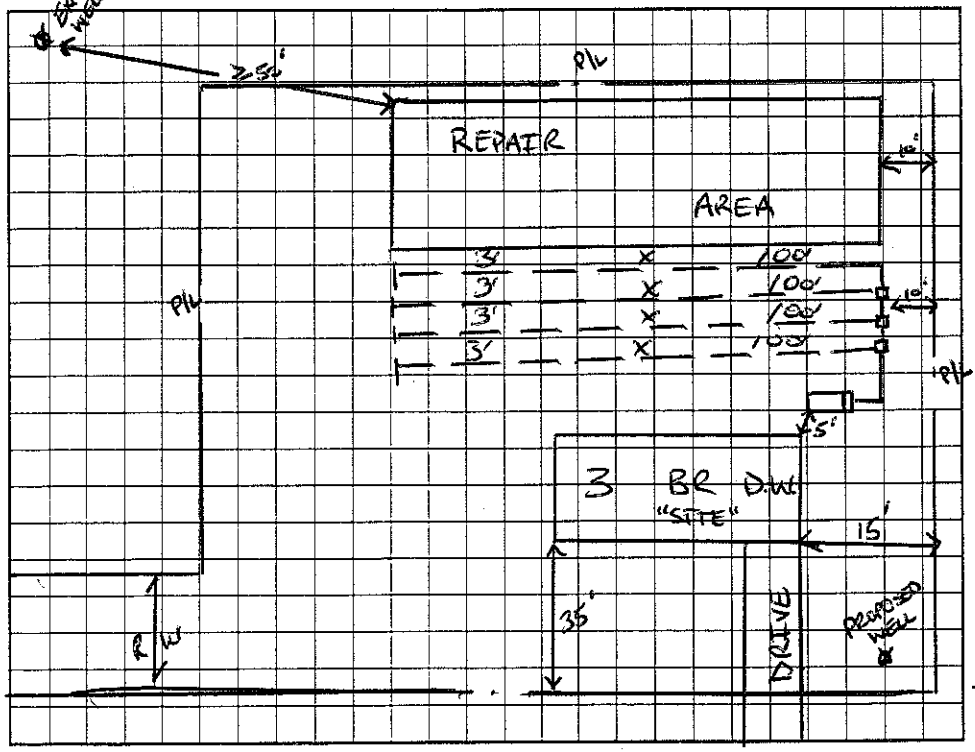
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community

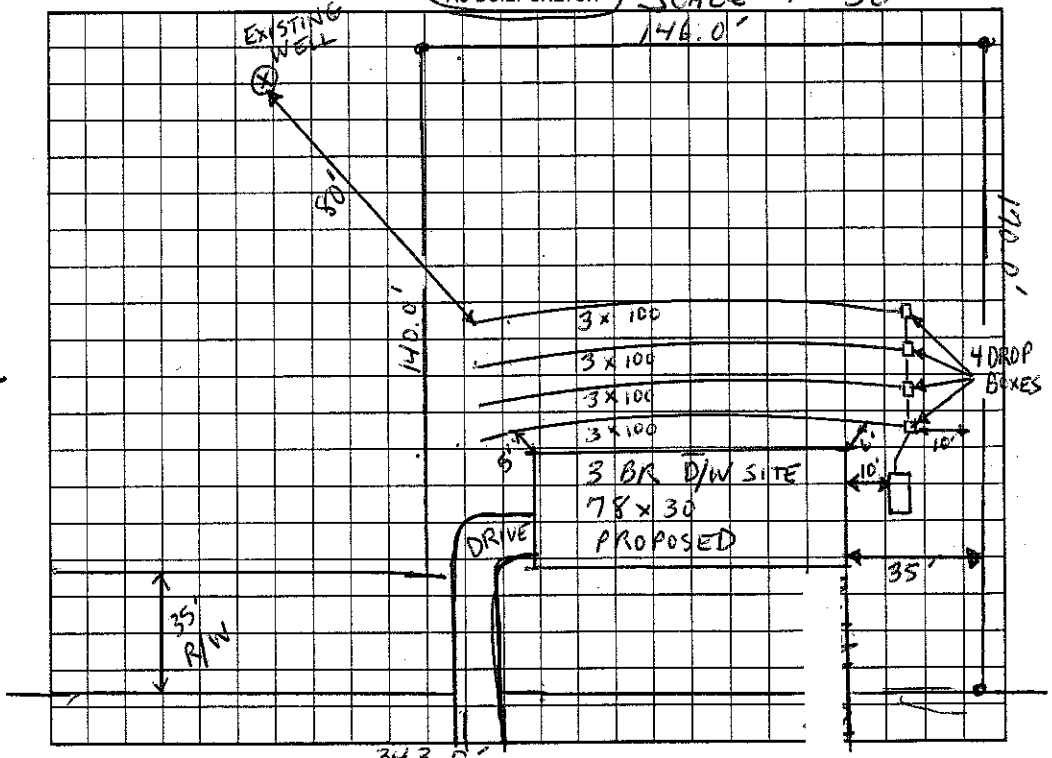
Comments:/Conditions: ① NO CUTTING OR FILLING OVER DRAINFIELD/REPAIR AREAS ② KEEP ALL DRAINS AWAY FROM DRAINFIELD/REPAIR AREAS ③ MAINTAIN NOTED SETBACKS ④ INSTALL DRAINLINES UNIFORM AND ON CONTOUR

Comments:/Conditions: ① TUFF-TITE FILTER ② #57 STONE ③ ACTUAL INSTALLATION MORE ON CONTOUR THAN INITIAL SITE SKETCH ④ INITIAL SKETCH NOT TO SCALE

INITIAL SITE SKETCH



AS BUILT SKETCH SCALE 1"=50'



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 _____

Improvement Permit by: _____ date 4/11/01

Authorization to Construct by: _____ date 4/11/01

Installed by: A-1 BACKHOE

Operation Permit by: _____ date 2-10-04

Existing System Inspection by: _____ date _____

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