IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4771-36-6094 DATE 06/02/03

OWNER OR CONTRACTOR ROBERT L. INGRAM PHONE: Business 704-450-8307 Home 704-528-0408

ADDRESS 221 WINDING ARBOR CR. CLEVELAND, NC 27013 704-634-8873-Jimmy Kinder,

LOCATION HWY 70 EAST, (R) TRIPLETT RD., ~3.3 miles (L) WATERMOSS DR., (R) 2nd WINDING ARBOR CR., ON RIGHT @ BOX # 221.

SUBDIVISION WILLOW RIDGE BLOCK / SECTION ____ LOT 33 LOT AREA 0.76 ACRES SITE CLASS. EXISTING DESIGN FLOW 360 GPD L.T.A.R. EXISTING 0.33

Septic Tank: 1,000 Gallons; STB 1007 Date 6-9-03

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 3 @ 80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: ____

Repair System Description: CONVENTIONAL, GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

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

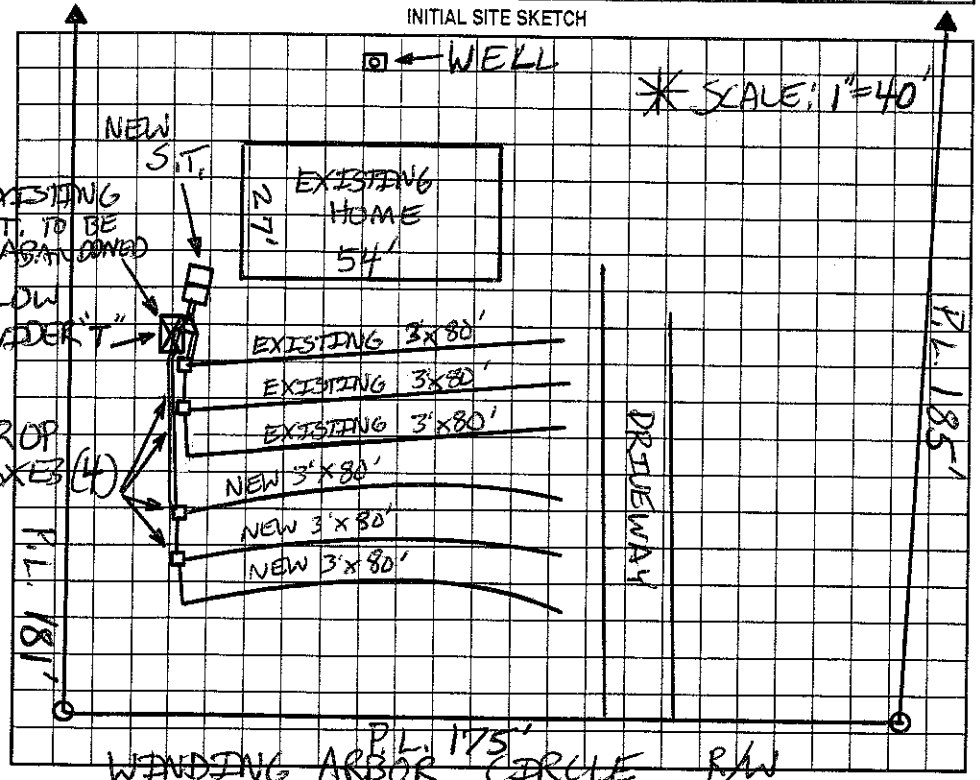
Water Supply: ☒ Individual ☐ Public ☐ Community EXISTING WELL

Comments:/Conditions: (1) EXISTING SEPTIC TANK TO BE CRUSHED + FILLED, REPLACE WITH NEW 1,000 GALLON S. TANK. (2) INSTALL 1 FLOW DIVIDER "T" + 4 NEW DROP BOXES.

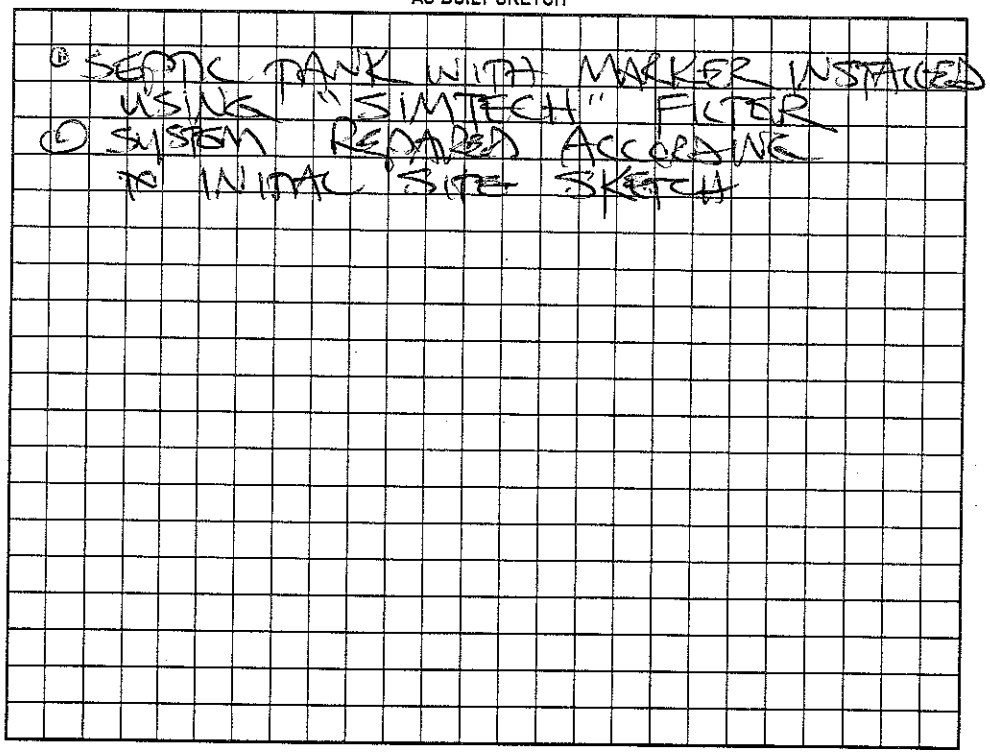
Comments:/Conditions:

* THIS PERMIT SERVES AS "NOTICE OF VIOLATION" AND MUST BE REPAIRED BY 07/07/03.*

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: Nicole Childers date 6/2/03 Installed by: WAYNE CLONTS

Improvement Permit by: Patrick Mitchell date 06/02/03 Operation Permit by: STEVE HENDRICK date 9-3-03

Authorization to Construct by: Patrick Mitchell date 06/02/03 Existing System Inspection by: ____ date ____

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