IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

(C) IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 124025 PIN# ~~4785-50-5083~~ 4785-40-2381 DATE 9-28-04

OWNER OR CONTRACTOR RICKI & FRANK PALA PHONE: Business 252-340-3636 Home 252-426-8459

ADDRESS 320 North Church Street, Hertford, NC 27944

LOCATION US 64 East, TR Barry Oak Road, TR Longview Road, 0.2 mile on Left (157 Longview Rd.)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.45 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.20 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 8-24-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 600
No Lines EIGHT Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

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

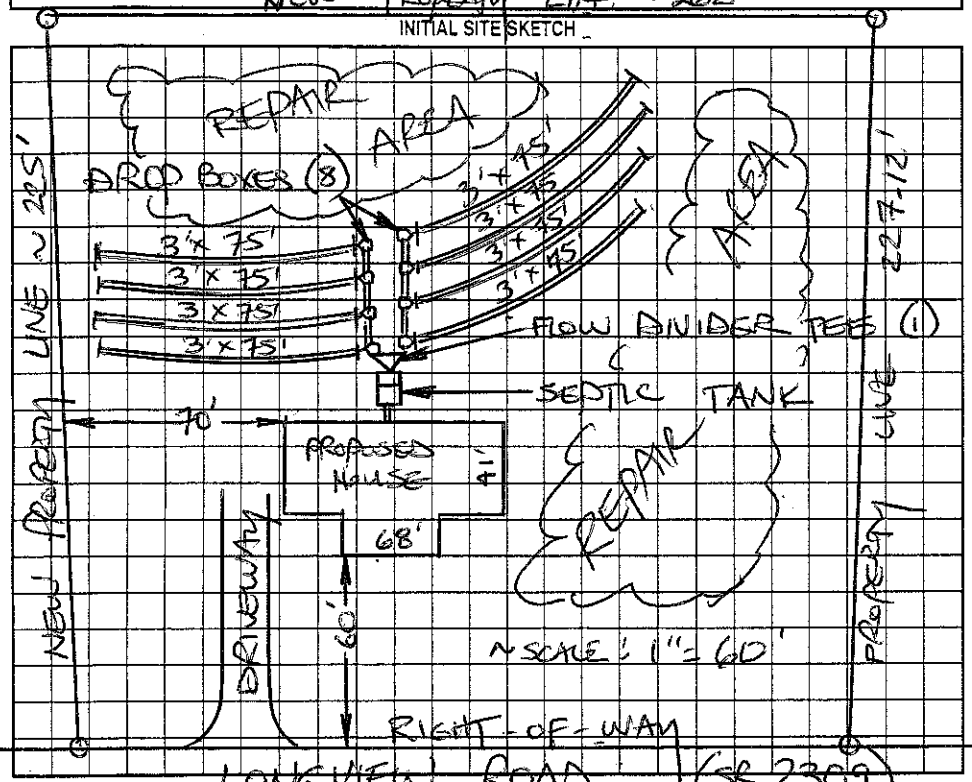
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES AS SHOWN

NEW PROPERTY LINE ~ 262'

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE 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: _____ date 9-28-04 Installed by: JAMES HUDLER

Improvement Permit by: STEVE HEDRICK date 9-28-04 Operation Permit by: STEVE HEDRICK date 11-10-04

Authorization to Construct by: STEVE HEDRICK date 9-28-04 Existing System Inspection by: _____ date _____

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