IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 124461 PIN# ~~4785-50-5083.001~~ 4785-50-5083 402579 DATE 11-5-04

OWNER OR CONTRACTOR BRIAN & DIANE RONAN PHONE: Business 252-340-3498 Home 252-482-5819

ADDRESS 100 W. GALE ST. EDENTON, NC 27932

LOCATION US 64 EAST, TR BARRY OAK ROAD, TR LONGVIEW ROAD, LOT ON LEFT ~ 0.1 MILE

SUBDIVISION ~~FRANK~~ PALA Longview SECTION 1 LOT 1 LOT AREA 1.40 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.20 GPD/FT²

Septic Tank: 1000 Gallons; STB 1007 Date 11-25-04
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"

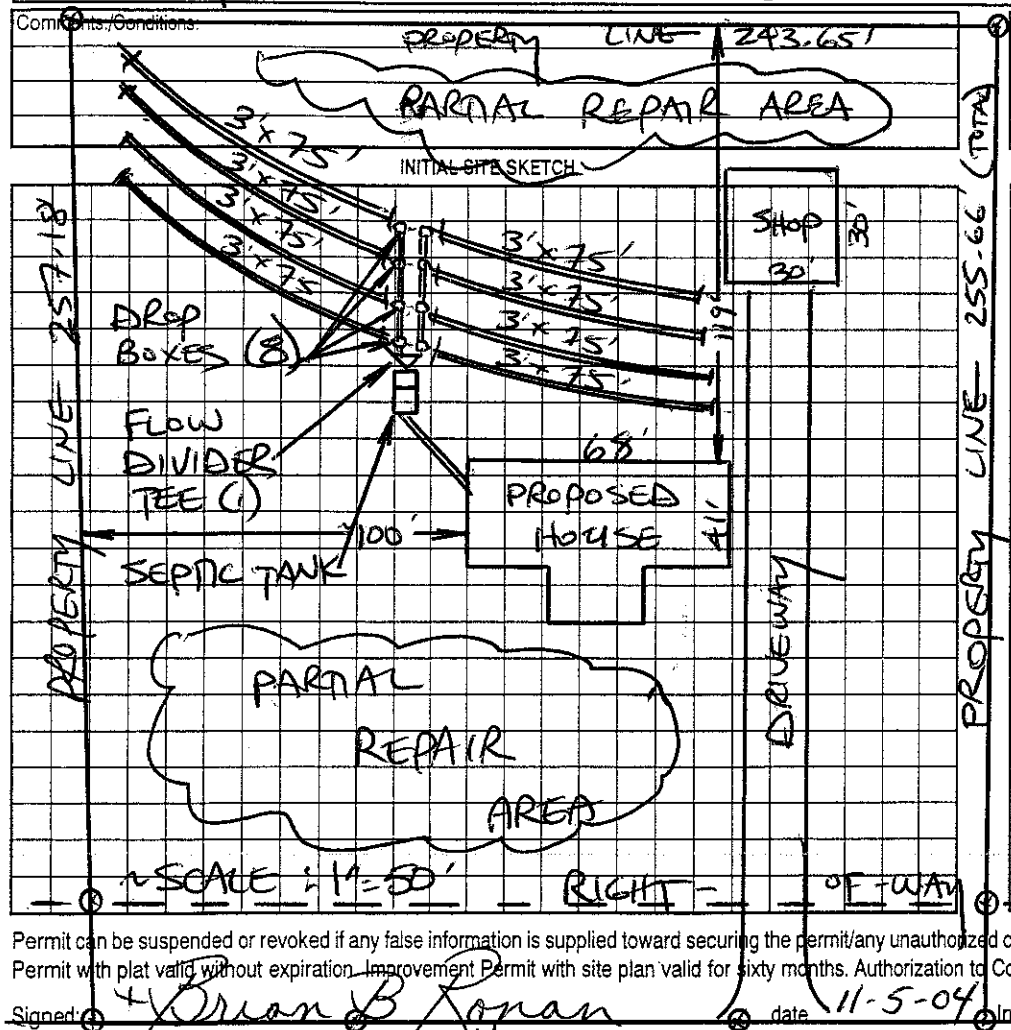
☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

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

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

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:



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

AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL 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: Brian B Ronan date 11-5-04 Installed by: JAMES HAILEY

Improvement Permit by: STEVE HEDRICK date 11-5-04 Operation Permit by: STEVE HEDRICK date 1-13-05

Authorization to Construct by: STEVE HEDRICK date 11-5-04 Existing System Inspection by: ____ date ____

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