IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C) 155.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 090578 PIN# 4788110941 PT DATE 8/14/02

OWNER OR CONTRACTOR DIXIE LAND INC PHONE: Business 828-478-5331 Home

ADDRESS 154 BETHANY RD STATESVILLE NC 28625

LOCATION OLD MOCKSVILLE RD - TR GANTT HORN - ON RT

SUBDIVISION EVANS ACRES BLOCK / SECTION LOT 1 LOT AREA .40AC SITE CLASS IS DESIGN FLOW 300 L.T.A.R. .36 00/EFF

Septic Tank: 1000 Gallons: STB 825 Date 9-24-02
Pump Tank: 1000 Gallons: PT 302 Date 8-5-02
Pump Make: Zoeller Model N98 Serial No. —
Nitrification Field: No Fields 1 Square Feet 270 Linear Feet ~~135~~ 139
No Lines 3@45' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

~~New System~~ ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: PUMP ON PANEL
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ~~No~~

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

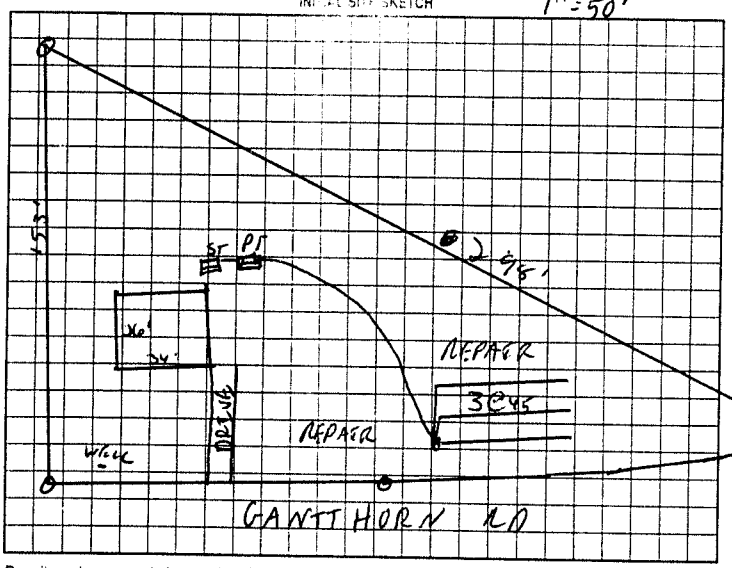
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ~~Individual~~ ☐ Public ☐ Community

Comments/Conditions:

Comments/Conditions: - Poly lok Filter In stalled wof
-Liner okay, Pressure Check Okay - 11/26/02 wof

INITIAL SITE SKETCH 1"=50'



AS BUILT SKETCH

Installed as Shown per 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: Diane wheeler date 8/20/02 Installed by: Rowan Septic

Improvement Permit by: C. Ogburn RS date 8/14/02 Operation Permit by: STEVE HEDRICK date 12-23-02

Authorization to Construct by: C. Ogburn RS date 8/14/02 Existing System Inspection by: date

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