# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093858 PIN# 4803 78 2151 DATE 1-22-01

OWNER OR CONTRACTOR MICHAEL BICIO PHONE Business [redacted] Home 592-2115

ADDRESS 291 OAK HOLLOW ROAD, UNION GROVE, [redacted] NC 28689

LOCATION NC 115 N, TL LINNEYS MILL RD, TR OAK HOLLOW ROAD, 0.8 MILE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.04 Acres SITE CLASS PS1 DESIGN FLOW 360 L.T.A.R 0.30 GPD/FT²

Septic Tank: 1000 Gallons STB 1012 Date 4-30-02
Pump Tank: _____ Gallons PT _____ Date _____
Pump Make: _____ Model _____ Serial No _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

✓ New System Repair System Type I II III IV V VI
System Description CONVENTIONAL GRAVITY
Repair System Description LARGE DIAMETER PIPE
Maintenance Agreement Required: Yes No
Slab ✓ Crawl Space Basement w/plumbing Basement wo/plumbing

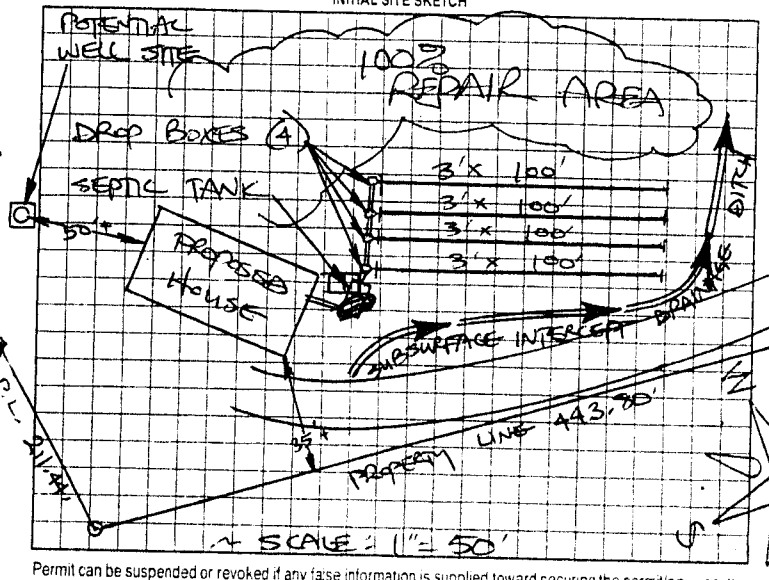
✓ House/Mod Home No. Bedrooms 3
Mobile Home No. Bathrooms 2
Business No. Employees
Other

Water Supply: ✓ Individual ☐ Public ☐ Community
WELL

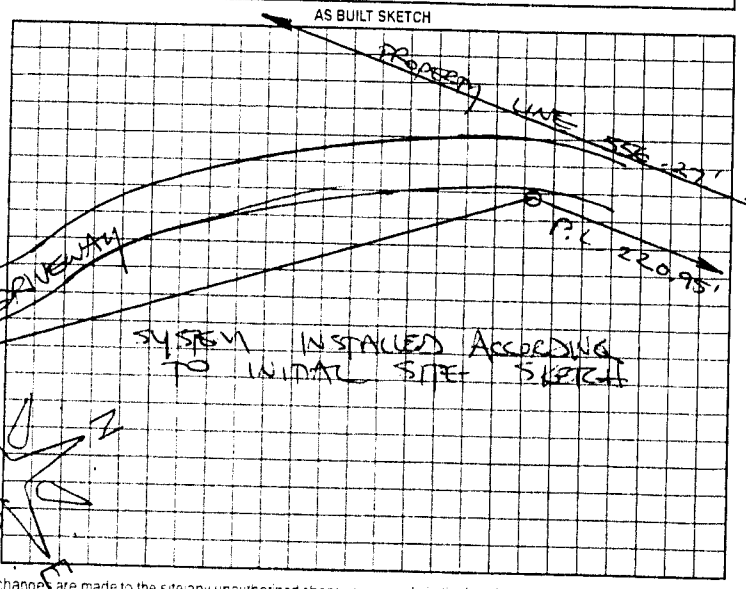
Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL ② INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 12" DEEP CUT TO DAYLIGHT

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

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: [signature] date 1-22-01 Installed by: PIEDMONT BACKHOE (STEVE JORDAN)

Improvement Permit by: STEVE HENDRICK date 1-22-01 Operation Permit by: STEVE HENDRICK date 9-4-02

Authorization to Construct by: STEVE HENDRICK date 1-22-01 Existing System Inspection by: _____ date _____

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