IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 081787 PIN# 4841 60 8736 DATE 6-4-99

OWNER OR CONTRACTOR EARL MADISON PHONE: Business Home 876-2949

ADDRESS 2338 JENNINGS ROAD, OLIN, NC 28660

LOCATION US 21 N, TL JENNINGS ROAD, ON RIGHT JUST PAST OLIN ROAD (NORTH)

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.94 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB 620 Date 4-10-99

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet EXISTING

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

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

System Description: CONV. GRAVITY

Repair System Description: MAX. FEASIBLE

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

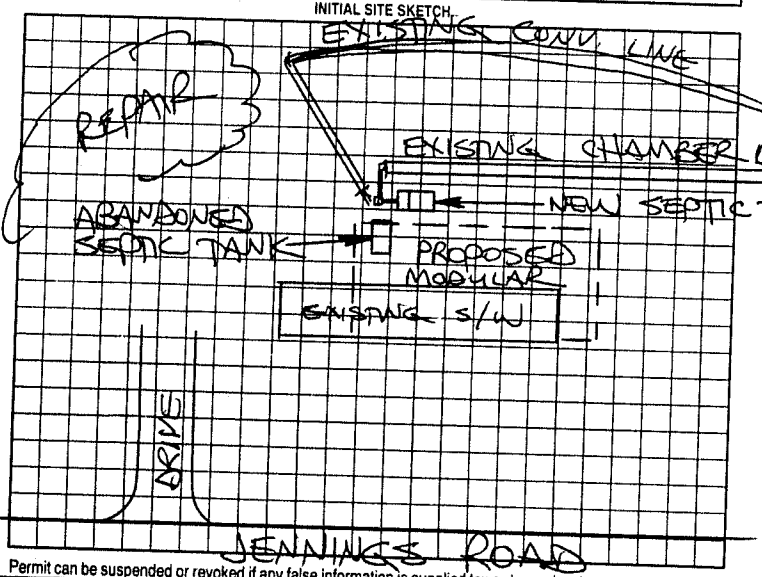
☐ Other

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: PUMP-OUT EXISTING SEPTIC TANK AND CAVE-IN AND FILL WITH SOIL

Comments/Conditions: SEPTIC TANK WITH RISERS INSTALLED WITH "POLYLOK" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM ALTERED 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: Kenny Madison date 6-4-99

Improvement Permit by: STEVE HEDRICK date 6-4-99

Authorization to Construct by: STEVE HEDRICK date 6-4-99

Installed by: KENNY MADISON

Operation Permit by: STEVE HEDRICK date 6-10-99

Existing System Inspection by: date

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