IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 140283 PIN# 4850006500 ~~4838~~ Lot 25 DATE 10-9-07

OWNER OR APPLICANT Dixieland PHONE: Business 704 202 4971 Home 704 876 6662

ADDRESS Cora Land

LOCATION Hwy 21 (L) on Jennings Rd (R) on Olin Loop (R) Cora, Property on left

SUBDIVISION Olin Ridge BLOCK / SECTION ____ LOT 19 LOT AREA .568 SITE CLASS. PS DESIGN FLOW 360x2 L.T.A.R. .3

Septic Tank: 1000x2 Gallons: STB 1-07-08 925 Date 1-03-2008 925

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 2 Square Feet 1200x2 Linear Feet 300x2

No Lines 12 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth n/a ☐ Gravity ☐ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: 25% Reduction Syst

Repair System Description: LP 50% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 6 tnk No. Persons ____ No. Employees ____

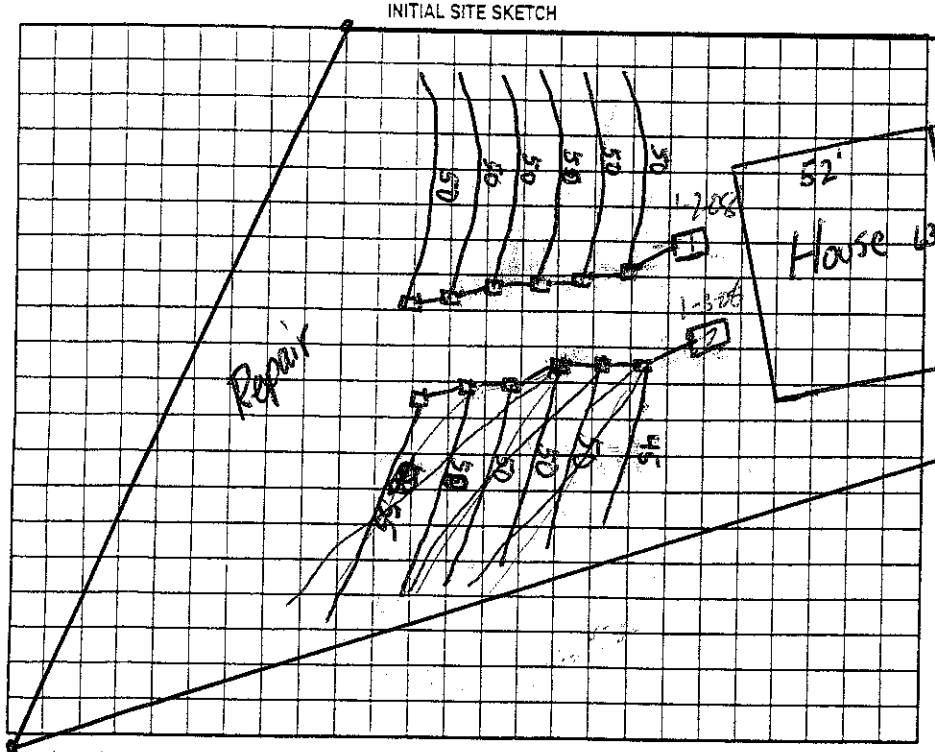
Water Supply: ☐ Individual ☒ Public ☐ Community

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

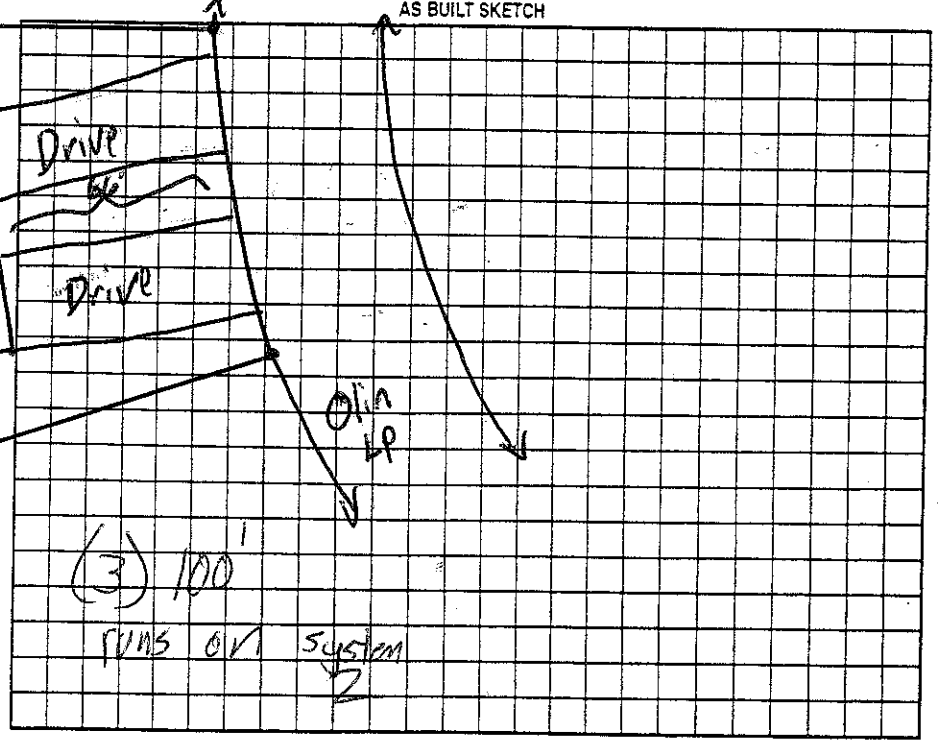
Comments:/Conditions:

Comments:/Conditions:

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: Regina C Douglas date 10/11/07 Installed by: Rowan Septic

Improvement Permit by: ____ date 10-9-07 Operation Permit by: ____ date 3-19-08

Authorization to Construct by: ____ date 10-9-07 Existing System Inspection by: ____ date ____

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