IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 087930 PIN# 4853 61 3675 (PART) DATE 2-29-00

OWNER OR CONTRACTOR RALPH DILLOW PHONE: Business Home (704) 948-0256

ADDRESS 9024 DEPOTTER DRIVE, HUNTERSVILLE, NC 28078

LOCATION I-77N, TL NC901, TR MULLIS ROAD, TL MANN ROAD, TR FOXFIELD LANE, AT END BEHIND HOUSE

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 11.22 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT

Septic Tank: 1000 Gallons; STB 312 Date 2-1-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No. Fields 1 Square Feet 1440 Linear Feet 480

No Lines four Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

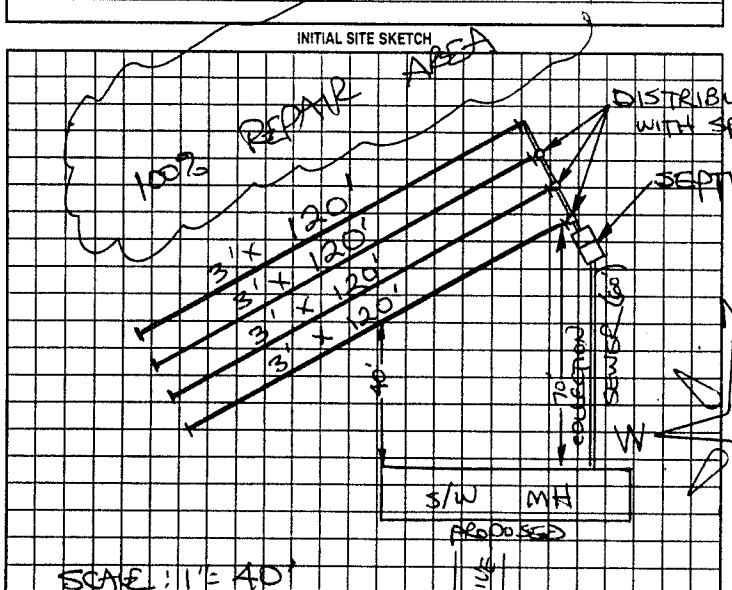
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL NEXT DOOR

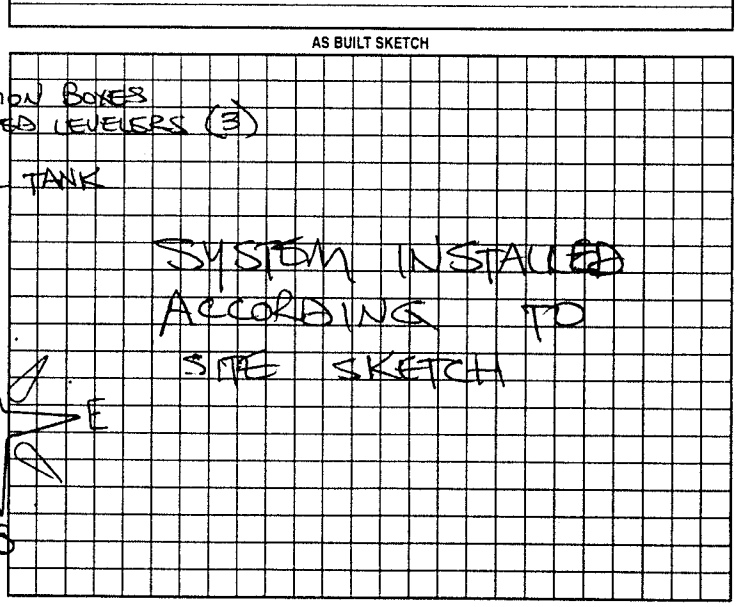
Comments:/Conditions: INSTALL LINES ON CONTOUR AS FLAGGED NO DEEPER THAN 28"

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" 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: X Dina Dillow date 2-29-00 Installed by: ~~XXXXXX~~ LARRY TUCKER

Improvement Permit by: STEVE HEDRICK date 2-29-00 Operation Permit by: STEVE HEDRICK date 3-7-00

Authorization to Construct by: STEVE HEDRICK date 2-29-00 Existing System Inspection by: _____ date _____

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