IREDELL COUNTY HEALTH DEPARTMENT (CI) Rev/3/17/08

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

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

PERMIT# 148517 PIN# 4853988691 DATE 3/17/08

OWNER OR APPLICANT Michael Turner PHONE: Business (910) 396-9157 Home (910) 497-1967

ADDRESS 725 Herman Plz, Ft. Bragg, NC 28037

LOCATION I-77 N, exit 65 TL, TR Mullis, TR Stop Sign, TL Zion Liberty, on Rt 64 Holland Farm Rd.

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA 23.48 acres SITE CLASS. _____ DESIGN FLOW 360 gpd L.T.A.R. 0.25

Septic Tank: 1000 Gallons; STB ~~@ 1083~~ Date 9-1-08

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 360

No Lines 4 Trench Width 36" Max Trench Bottom Depth *19" & 23" Gravel Depth NA

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

System Description: 25% Reduction, gravity

Repair System Description: exempt

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

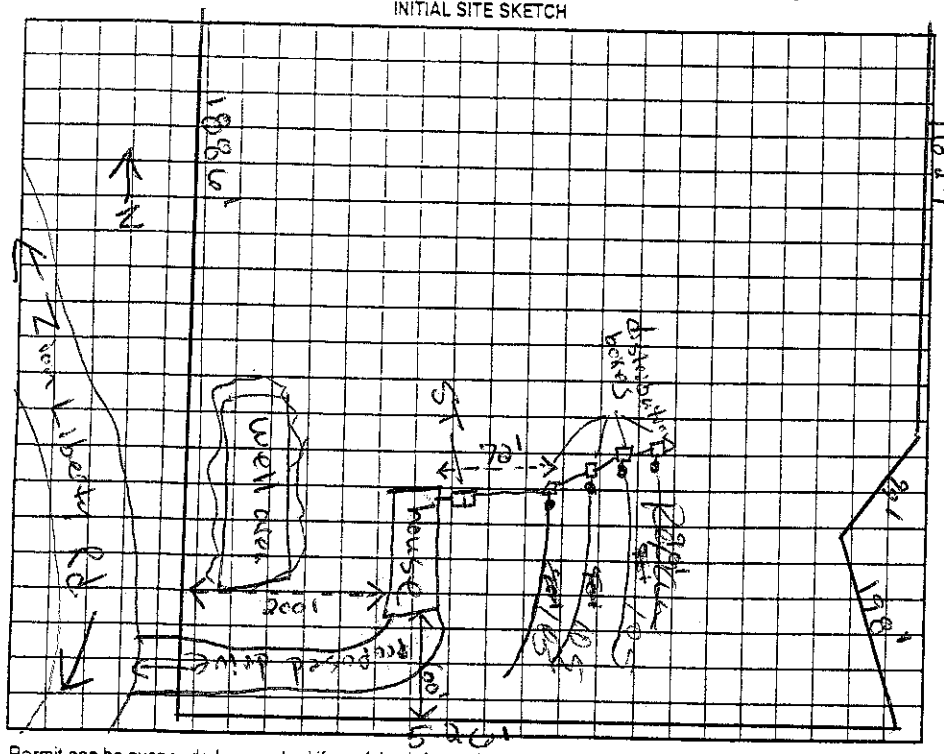
Water Supply: ☑ Individual ☐ Public ☐ Community

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

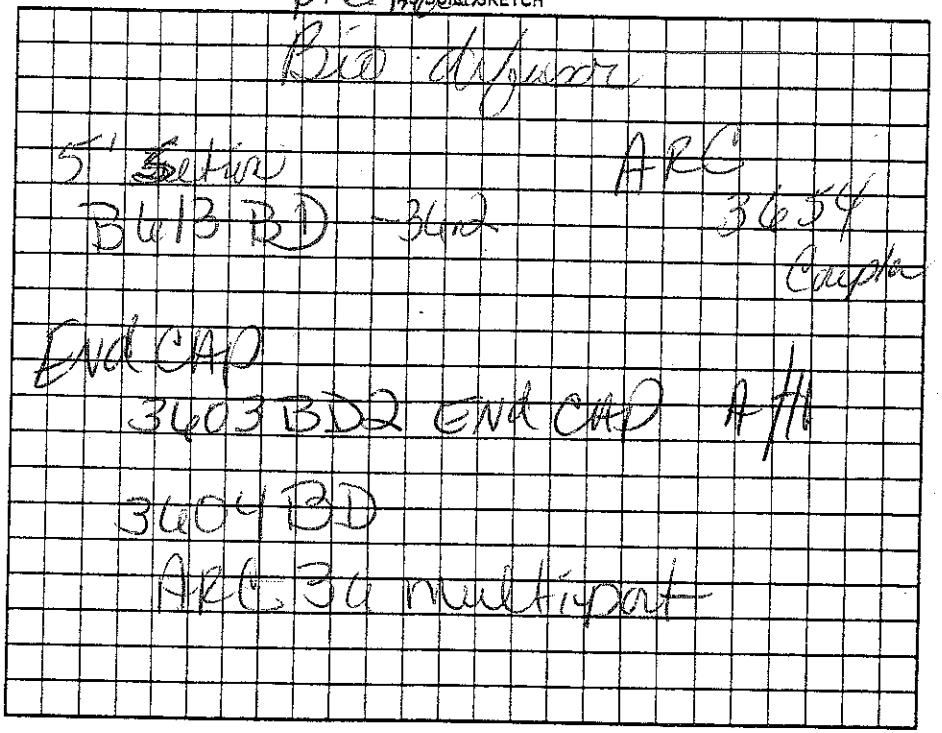
Comments/Conditions: * - max trench depth 19" shallow side & 23" on deep side
- install on contour
- maintain all setbacks *call w/ questions

Comments/Conditions: Yellow Lupton Septic

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: Michael W. Turner date 3/18/08

Improvement Permit by: Randy Moore date 3/17/08

Authorization to Construct by: Randy Moore date 3/17/08

Installed by: Ray

Operation Permit by: Kelly Cook date 10-23-08

Existing System Inspection by: _____ date _____

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