IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☒ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT (1) / OPERATION PERMIT (2) / EXISTING SYSTEM INSPECTION

PERMIT 165271 PIN # 4854-61-6503 DATE 3-14-11

OWNER Alan + Mandi Moeller APPLICANT: America's Homeplace PHONE: Home/Cell # 704 872 4400 Business #

SITE ADDRESS 812 Union Grove Rd. OWNER / APPLICANT ADDRESS 812 Union Grove Rd.

SITE DIRECTIONS 77 N to (L) on Memorial Hwy to (R) on Union Grove Rd, on left.

SUBDIVISION n/a BLOCK / SECTION n/a LOT # n/a LOT AREA 6.163 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank 1000 Gallons: STB 1017 Date 5-5-10

Pump Tank ____ Gallons: P T ____ Date ____

Pump Make ____ Model ____ Serial # ____

No. Nitrification Fields: 1 No. Lines 3 Linear Feet 360

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth n/a

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

System Description: 25% Reduction Gravity

Repair System Description: 25% Reduction Gravity

Maintenance Agreement Required ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons ____

☐ Other No. Employees ____

☐ Slab ☒ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

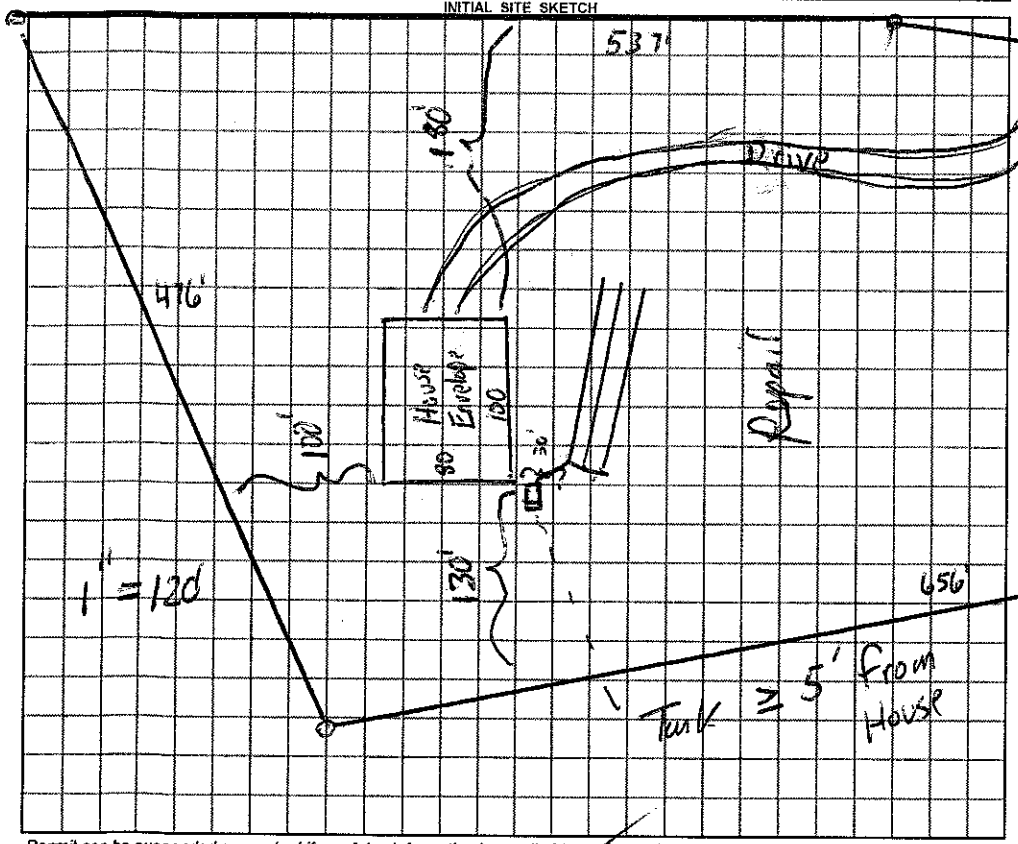
Comments / Conditions

(3) 3' x 120'

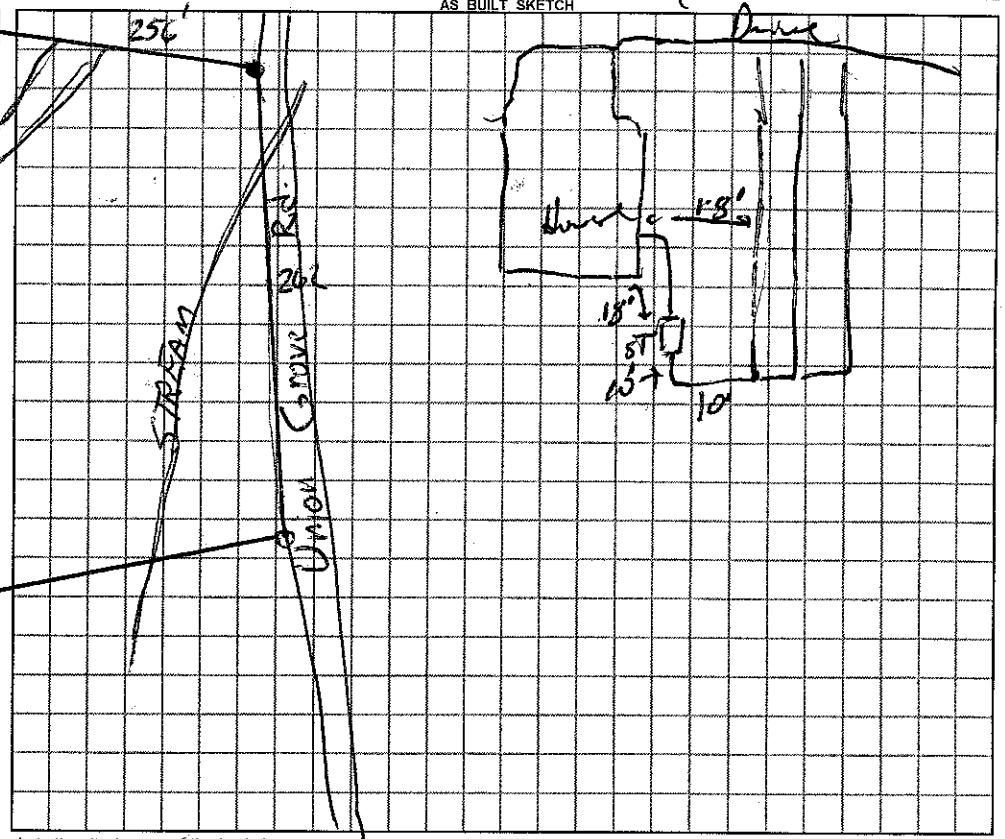
Polylok fittings / ST Markers / End cap distribution /

Bindings are 36

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 ~~plat~~ valid ~~without~~ expiration. site plan valid 60 mo.* ☒ *AUTHORIZATION TO CONSTRUCT* valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: ____ Date 3-16-11 Installed by: Groundbreakers

IMPROVEMENT PERMIT by: ____ REHS Date 3-14-10 OPERATION PERMIT by: ____ REHS Date 13 April 11

AUTHORIZATION TO CONSTRUCT by: ____ REHS Date 3-14-10 Existing System Inspected by: ____ REHS Date ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy – Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant