IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

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

PERMIT # 214583

PIN # 4861-32-5309

APPLICANT: Horne Building Inc. APPLICANT ADDRESS: 229 Cedar Lake Rd. Statesville, NC 28625

SITE ADDRESS: 118 Allen Hills Way Olin, NC 28660 PHONE: 704-878-2224 ALT. PHONE: 704-902-0399

SITE DIRECTIONS: I-77 North → Exit Right to Tomlin Mill Rd → Left onto Jaba Rd → Left onto Speaks Rd → Left on Padgett Farms → Left onto Allen Hills Way

SUBDIVISION: Padgett Farms SECTION: — LOT # 37 LOT AREA: 0.52 DESIGN FLOW: 360 gal/day L.T.A.R.: 0.3

Septic Tank 1000 (gal) STB 1160 Date 4-6-16

Pump Tank — (gal) PT — Date —

Pump Make — Model Pat Hole Serial # Pat-Lev

Nitrification Fields 1 # Lines 4 Linear Ft: 300

Trench Width 36" Max. Trench Bottom Depth 30" Gravel Depth —

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

System Description: 25% Reduction

Repair System Description: 50% Reduction

Maintenance Agreement Required: ☐ YES ☒ NO

☒ GRAVITY ☐ PRESSURE

☒ Residence ☐ Business ☐ Other ☒ Slab ☐ Basement w/plumbing

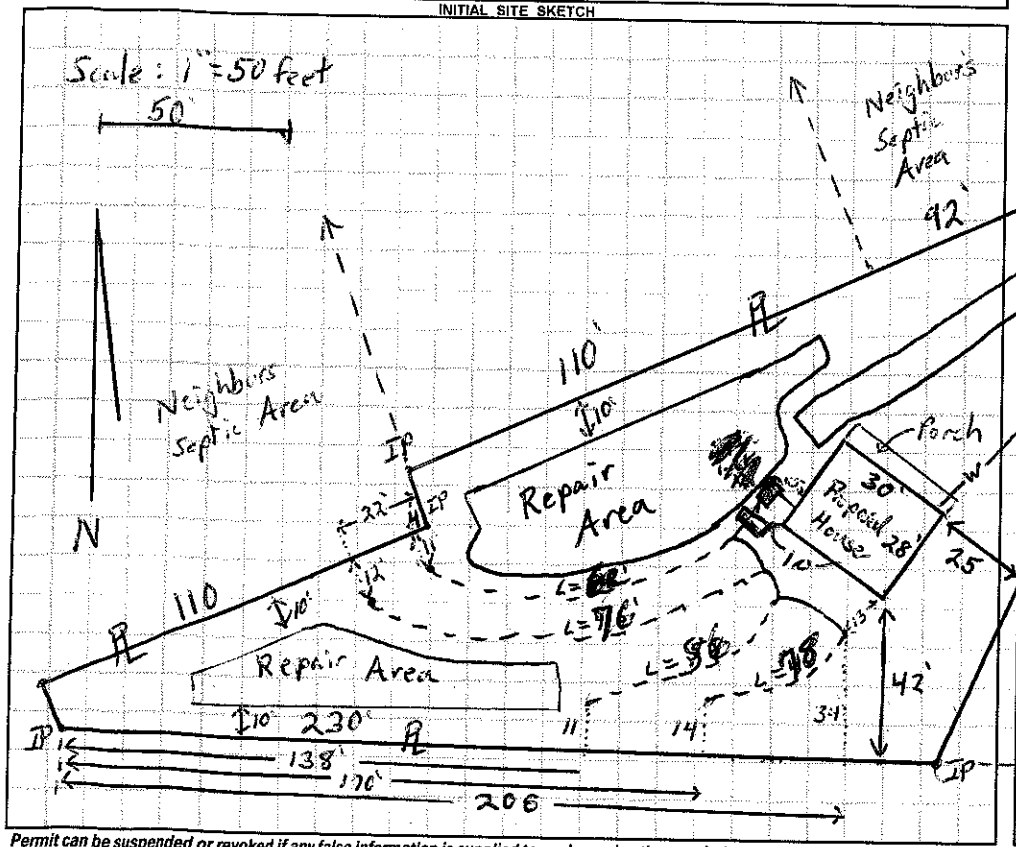
No. Bedrooms 3 No. Persons 6 No. Employees — ☐ Crawl Space

Water Supply: ☐ Private ☒ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: Serial distribution required. Keep septic tank + other components at least 5' away from house foundation. Follow all NC septic rules. Recommend pumping septic tank every 3-5 years.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed Quik 4 as drawn

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

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

Owner / Applicant Signature: Carolyn Horne Date: 12-30-15

IMPROVEMENT PERMIT by: Tom Shuck Date: 12-21-15

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 12-21-15

Installed by: Joey Cothran

OPERATION PERMIT by: Date: 06/08/16

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK