CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14258 PIN# 4786133577

OWNER OR APPLICANT JC Thorpe PHONE: Business Home 704-546-3312 DATE 15 May 07

ADDRESS 1093 Zion Rd Olin, NC 28660

LOCATION US 70 W to Jabar Road 3rd lot on left para

SUBDIVISION BLOCK / SECTION LOT LOT AREA 3.82 SITE CLASS. B

Septic Tank: Exist 1000 Gallons: STB 620 Date 7-6-01

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet 1200 Linear Feet 400

No Lines 5 Trench Width 3'6" Max Trench Bottom Depth 3' Gravel Depth 12"

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

System Description: Exist Conven - Gravity

Repair System Description: Conventional Gravity

Maintenance Agreement Required: ☐ Yes ☐ No

DESIGN FLOW 360 L.T.A.R. 1.3

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

No. Bedrooms 3 No. Persons No. Employees

Water Supply: ☐ Individual ☒ Public ☐ Community

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

Comments:/Conditions:

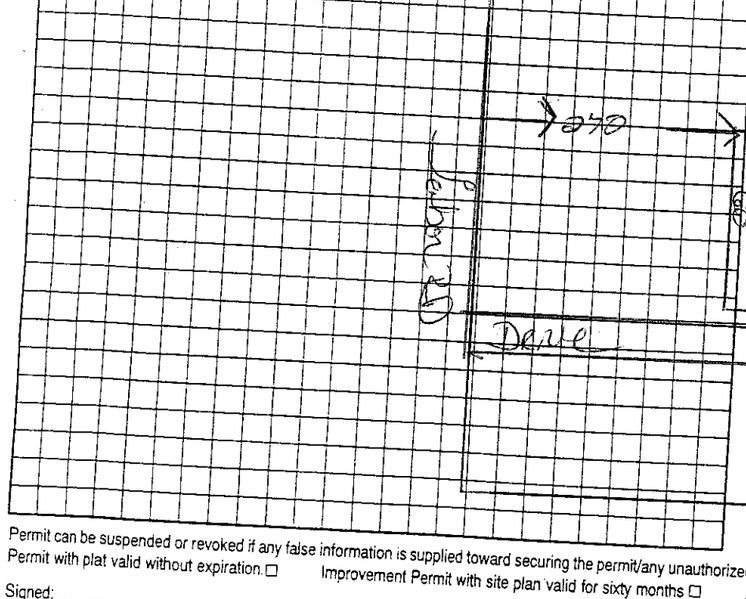
Comments:/Conditions:

NO RISER on Septic tank

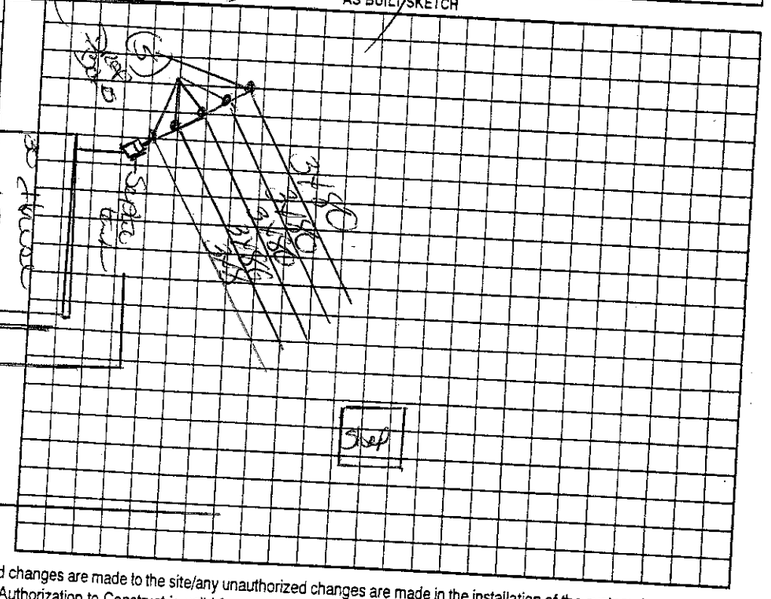
as noted on original permit

Label letter

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: date

Improvement Permit by: date

Authorization to Construct by: date

Installed by:

Operation Permit by: date

Existing System Inspection by: date 15-May-07

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