IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101256 PIN# 4862-39-1724 DATE 7-20-01

OWNER OR CONTRACTOR JOSEPH CHULICK PHONE: Business Home (814) 495-5068

ADDRESS P.O. BOX 192 SAINT MICHAEL PA 15951

LOCATION I-77 NORTH TR NC 901 TL CRATER RD TR CARTWRIGHT RD TL CHESHIRE RIDGE RD, LOT ON LEFT AT CURVE

SUBDIVISION CHESHIRE RIDGE BLOCK / SECTION II LOT 27 LOT AREA 2.49 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 238 Date 6-1-01
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines Four Trench Width 36" Max Trench Bottom Depth 36"

☒ 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
Gravel Depth 12" ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

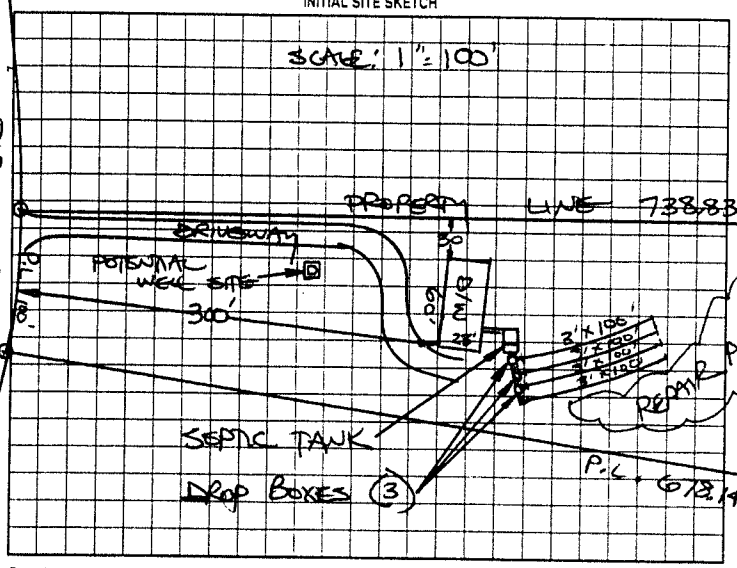
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

Water Supply: ☒ Individual ☐ Public ☐ Community WELL

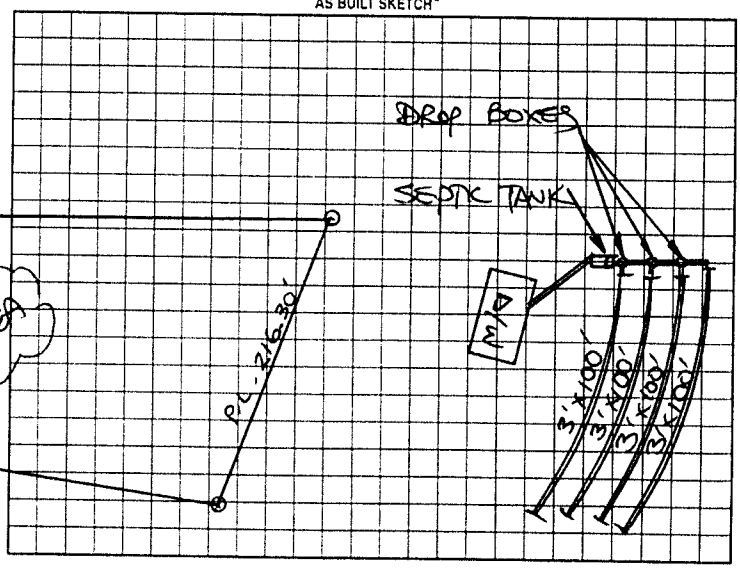
Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER ② SYSTEM ALTERED AS SHOWN WITH PRIOR HEALTH DEPARTMENT APPROVAL

INITIAL SITE SKETCH



AS BUILT SKETCH



CHESHIRE RIDGE ROAD

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: [signature] date 7-20-01

Improvement Permit by: STEVE HEDRICK date 7-20-01

Authorization to Construct by: STEVE HEDRICK date 7-20-01

Installed by: SALMONS CONCRETE PRODUCTS

Operation Permit by: STEVE HEDRICK date 8-29-01

Existing System Inspection by: ____ date ____

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