IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# ~~09500~~ 128650 ~~4860~~ ~~72 9958~~ 2729950 DATE 6-9-01

OWNER OR CONTRACTOR RONALD MATNEY PHONE: Business 709-880-4359 Home (704) 539-4648

ADDRESS P.O. BOX 134, OLIN, NC 28660

LOCATION I-77N, TR NC 901, TL ALLEN ROAD, ON RIGHT AT #370, BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 10.05 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 6-23-04

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model 50 GPD Serial No. 300

Nitrification Field ~~No.~~ Fields 1 Square Feet 1200 Linear Feet ~~400~~ 252

No Lines ~~Four~~ Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONVENTIONAL PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

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

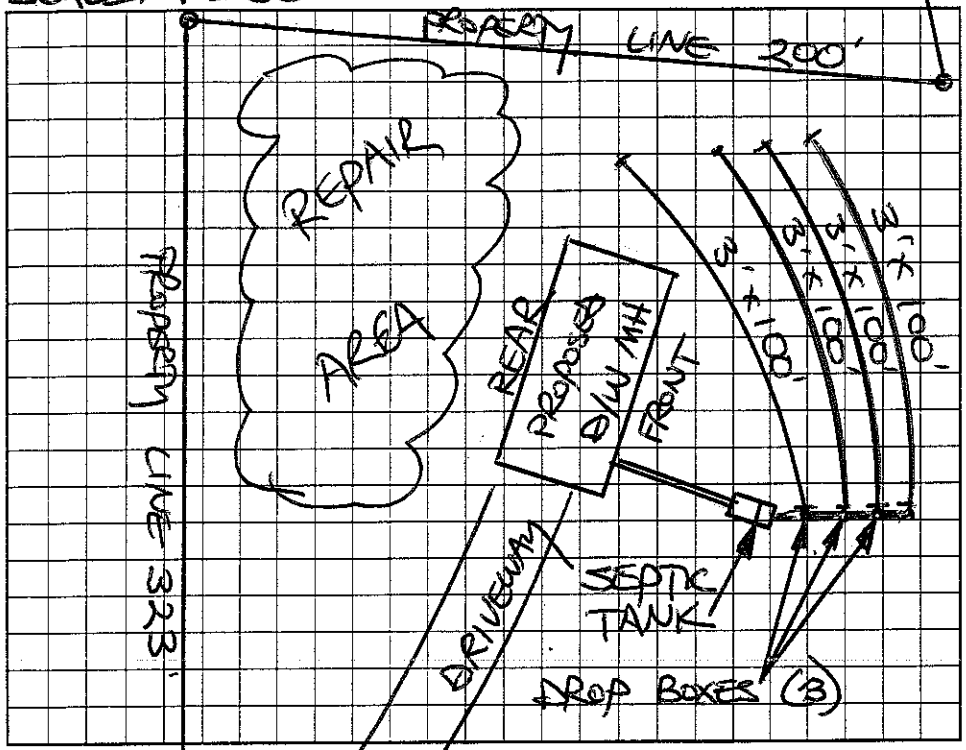
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: DOUBLE-WIDE MH TO BE ORIENTED WITHIN 20° OF ALLEN ROAD AS SHOWN

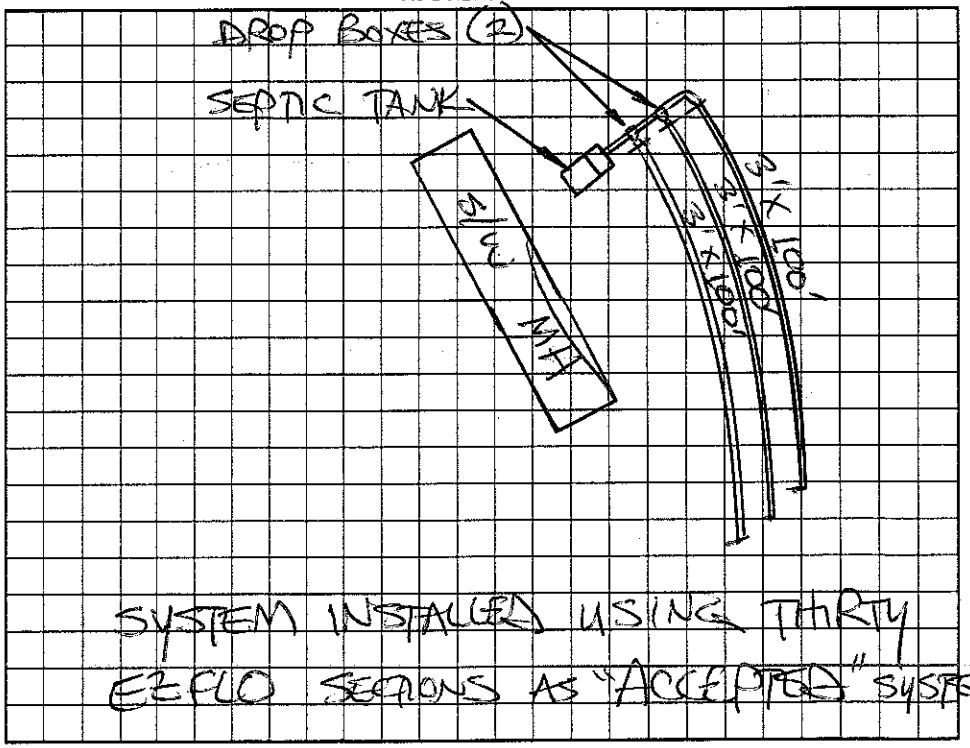
Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "RED" "POLYLOK" FILTER

SCALE: 1" = 50'

INITIAL SITE SKETCH



AS BUILT SKETCH



SYSTEM INSTALLED USING THIRTY EZFLO SECTIONS AS "ACCEPTED" SYSTEM

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 6-13-01

Improvement Permit by: STEVE HEDRICK date 6-9-01

Authorization to Construct by: STEVE HEDRICK date 6-9-01

Installed by: RONALD MATNEY

Operation Permit by: STEVE HEDRICK date 5-3-05

Existing System Inspection by: _____ date _____

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