

LINCOLN COUNTY HEALTH DEPARTMENT

302 NORTH ACADEMY STREET, SUITE B • LINCOLNTON, N.C. 28092 • (704) 736-8426

Application Type: EH IMPROVEMENT APPLICATION

Date: 10/23/07

Permit #: 07-90001088 PIN: 3696 -00 -30 -4380 Parcel ID: 87679

Owner: HECHT REALTY (704) 483-3651
388 N HIGHWAY 16 DENVER NC 28037

Applicant:

Directions to property: KILLIAN CROSSING DR
KILLIANS CROSSING, PH 3, LOT 54, HWY 15
OE, R ON HWY 16 (OLD), L ON GRASSY CREEK
RD, R INTO SUBD. CONTACT KATHLEE SAUNDE
RS (S&ME, INC) 704-942-1250 (CELL)



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Residence: 1 Nbr of Bedrooms: 4

Water Supply: PUBLIC



IMPROVEMENT PERMIT

FINAL COMPLETION

- REPAIR (SEPTIC/WELL)
- NEW WELL REPLACEMENT
- LOT DEMED

- OP
- WELL COC
- RC

-New applicants must reapply for an authorization to construct and well permit, if applicable, at the current fee in order to obtain a building permit and have septic system and well installed.

-New applicant must remark all structures and property lines as marking policy states before our office revisits the site to issue the authorization to construct permit.

AUTHORIZATION TO CONSTRUCT

TYPE OF SYSTEM _____

TANK SIZE _____

ABSORPTION AREA _____

TRENCH WIDTH & LENGTH & DEPTH _____

NUMBER OF TRENCHES _____

TRENCH SPACING _____

GRAVEL DEPTH _____

DISTANCE TO WATER SUPPLY _____ FT.

DESIGN FLOW _____ LTAR _____

CONDITIONS DO NOT INSTALL WHEN WET

TANK MANUFACTURER _____

TANK SIZE _____

ABSORPTION AREA _____

TRENCH WIDTH & LENGTH & DEPTH _____

NUMBER OF TRENCHES _____

GRAVEL DEPTH _____

DISTANCE TO WATER SUPPLY _____ FT.

INSTALLER _____

CONDITIONS _____

HEALTH DEPT. REP. April Bumgarner

DATE: 11.26.07

HEALTH DEPT. REP. _____

DATE: _____

IMPROVEMENT PERMIT: THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR THE INTENDED USE ARE CHANGED FROM THOSE SHOWN ON PERMIT. CHANGES FROM THE ABOVE PERMIT REQUIRE HEALTH DEPARTMENT APPROVAL. INSTALLER SHALL BE REQUIRED TO HAVE AN "AUTHORIZATION TO CONSTRUCT" (VALID FOR 60 MONTHS) BEFORE INSTALLING THE ABOVE SYSTEM.

FINAL COMPLETION: FINAL APPROVAL OF THIS SYSTEM SHALL INDICATE THAT THE SYSTEM HAS BEEN INSTALLED IN ACCORDANCE WITH STATE REGULATIONS, BUT IN NO WAY SHOULD BE TAKEN AS A GUARANTEE THAT THE SYSTEM WILL FUNCTION SATISFACTORY FOR ANY GIVEN TIME.