IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT REPLACES EXPIRED PERMIT #25262

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

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

PERMIT# 150171 PIN# 3774-93-3775 DATE 6-5-2008

OWNER OR APPLICANT BLUE CANOE PROPERTIES PHONE: Business 704-902-0286 Home

ADDRESS 105 GALAX DRIVE, STATESVILLE NC 28677

LOCATION STEWART ROCK RD TO FULBRIGHT RD TR GARDNER POINT DR, TR OAK POINT LN, 2ND LOT ON LEFT

SUBDIVISION RIVERWALK BLOCK / SECTION V LOT 29 LOT AREA 1.373 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1000 Gallons: STB 1012-1000 Date 12-21-11

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No. Fields 1 Square Feet 1600 Linear Feet 400

No. Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: ~~SHALLOW 25% REDUCTION~~

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons _____

☐ Business No. Employees _____

☐ Other _____

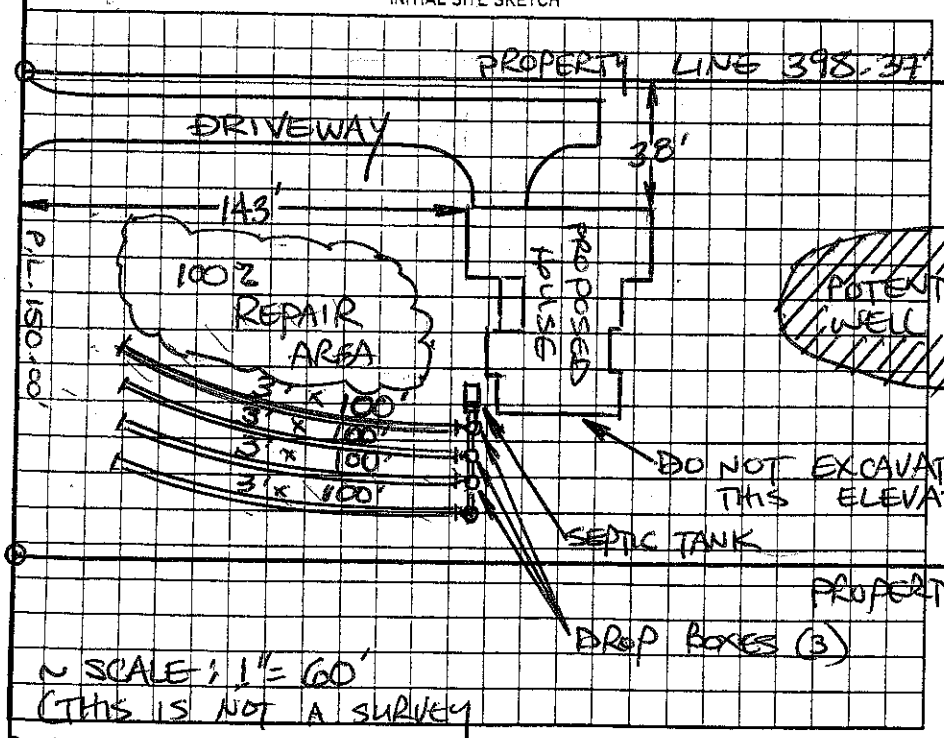
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN ② KEEP SYSTEM MINIMUM 100' FROM WELL

Comments:/Conditions: RedPolylok filter installed
2" PVC Septic Tank Marker

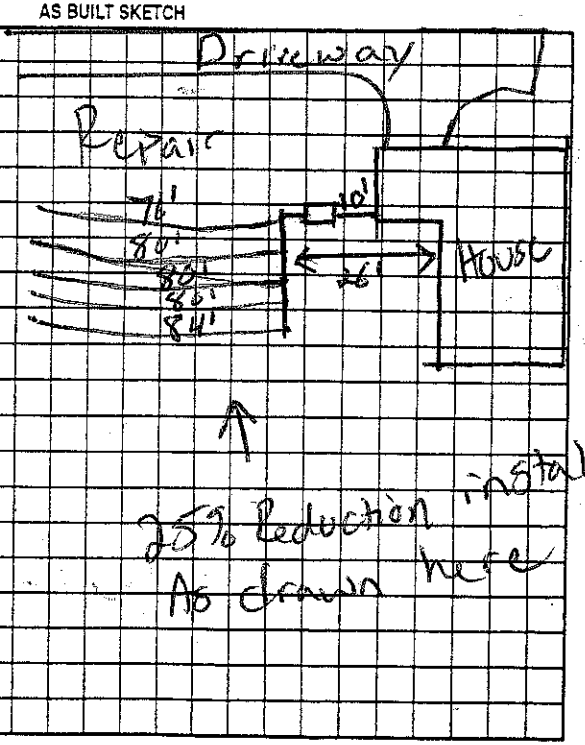
INITIAL SITE SKETCH



SCALE: 1" = 60'

(THIS IS NOT A SURVEY)

AS BUILT SKETCH



OAK POINT LANE

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: X David Mercer date 6-5-08 Installed by: Groundbreakers Grading

Improvement Permit by: STEVE HEDRICK date 6-5-08 Operation Permit by: [signature] date 7-17-12

Authorization to Construct by: STEVE HEDRICK date 6-5-08 Existing System Inspection by: _____ date _____

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