IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 84035 PIN# 3785798398 DATE Oct 12, 99

OWNER OR CONTRACTOR Wendell Turcott PHONE: Business _____ Home 635-7609

ADDRESS 2320 Huckleberry Ridge Rd Hiddenite

LOCATION N old MT Rd (L) County Line Rd (L) Jordan Crest Lot on Right

SUBDIVISION Victorias Landmk BLOCK / SECTION _____ LOT 24/25 LOT AREA 41052 SQ FT TOTAL SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 3

Septic Tank: 1000 Gallons; STB 786 Date 9/99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: GRAVITY 25% Reduction
Repair System Description: Same Pump possible
Maintenance Agreement Required: ☐ Yes ☒ No

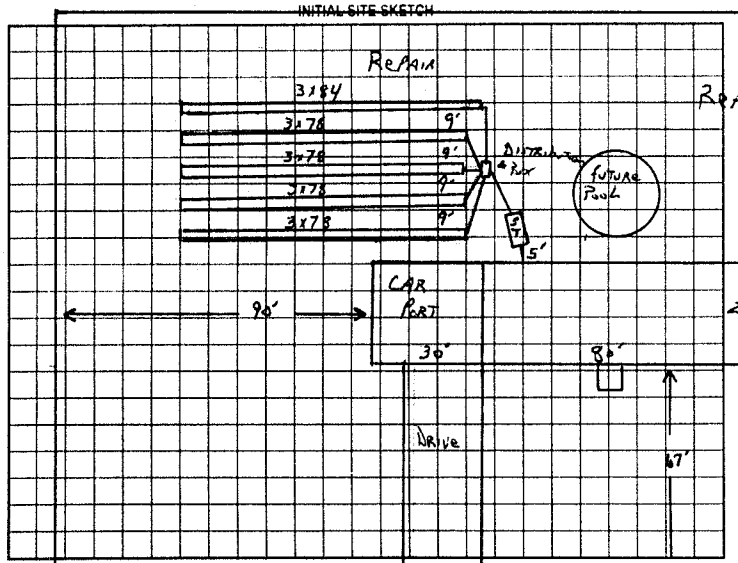
☐ House/Mod. Home No. Bedrooms 4
☒ Mobile Home LW No. Bathrooms 3
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

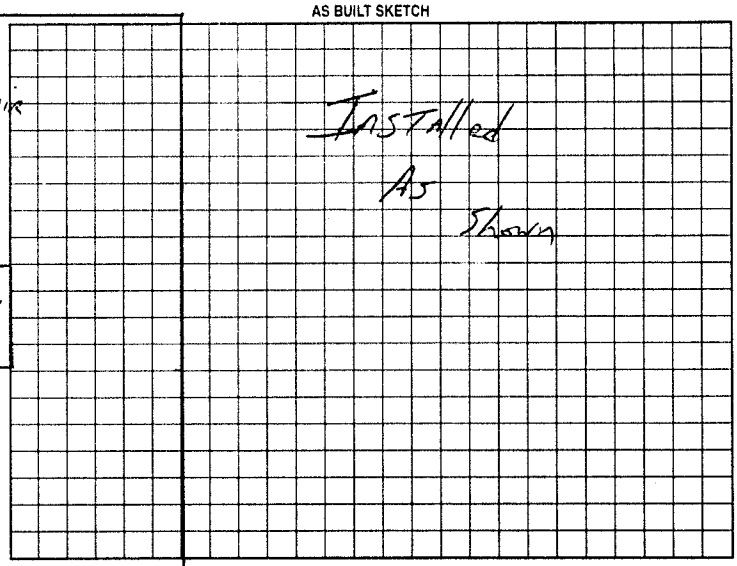
Comments/Conditions: 66 Chambers or 400 HDS Sections
Need Revised PLAT showing owning Lot 24 + 25

Comments /Conditions

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: Patricia Turcott date 10/15/99

Improvement Permit by: JC Potter date OCT 12 99

Authorization to Construct by: JC Potter date OCT 12 99

Installed by: G & M Enterprises

Operation Permit by: JC Potter date Oct 28 99

Existing System Inspection by: _____ date _____

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