# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 500 Paid MOORESVILLE 704-664-5281

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

PERMIT# 090764 PIN# 4625 94 1684 PL. 4625 74 4385 DATE 3/4/03

OWNER OR CONTRACTOR GREG SMITH PHONE: Business 704-892-0909 EXT Home/02

ADDRESS PO Box 4908 DAVIDSON, NC 28036

LOCATION 1100 TR STONEWALL BEACH AT END ON (L) 123 Stonewall Beach

SUBDIVISION POINT BLOCK / SECTION 6 LOT 633 LOT AREA 1.54c SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .3

Septic Tank: 1500 Gallons: STB 1011 Date 12/30/03
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500
No Lines 5@100' Trench Width 3' Max Trench Bottom Depth 3'

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY - TYPE 3 MATERIAL
Repair System Description: PRESSURE TO 16" PPBPS
Maintenance Agreement Required: [X] Yes [ ] No
Gravel Depth NA

[X] House/Mod. Home No. Bedrooms 5
[ ] Mobile Home No. Bathrooms 5
[ ] Business No. Employees _____
[ ] Other _____
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [ ] Individual [ ] Public [X] Community POINT

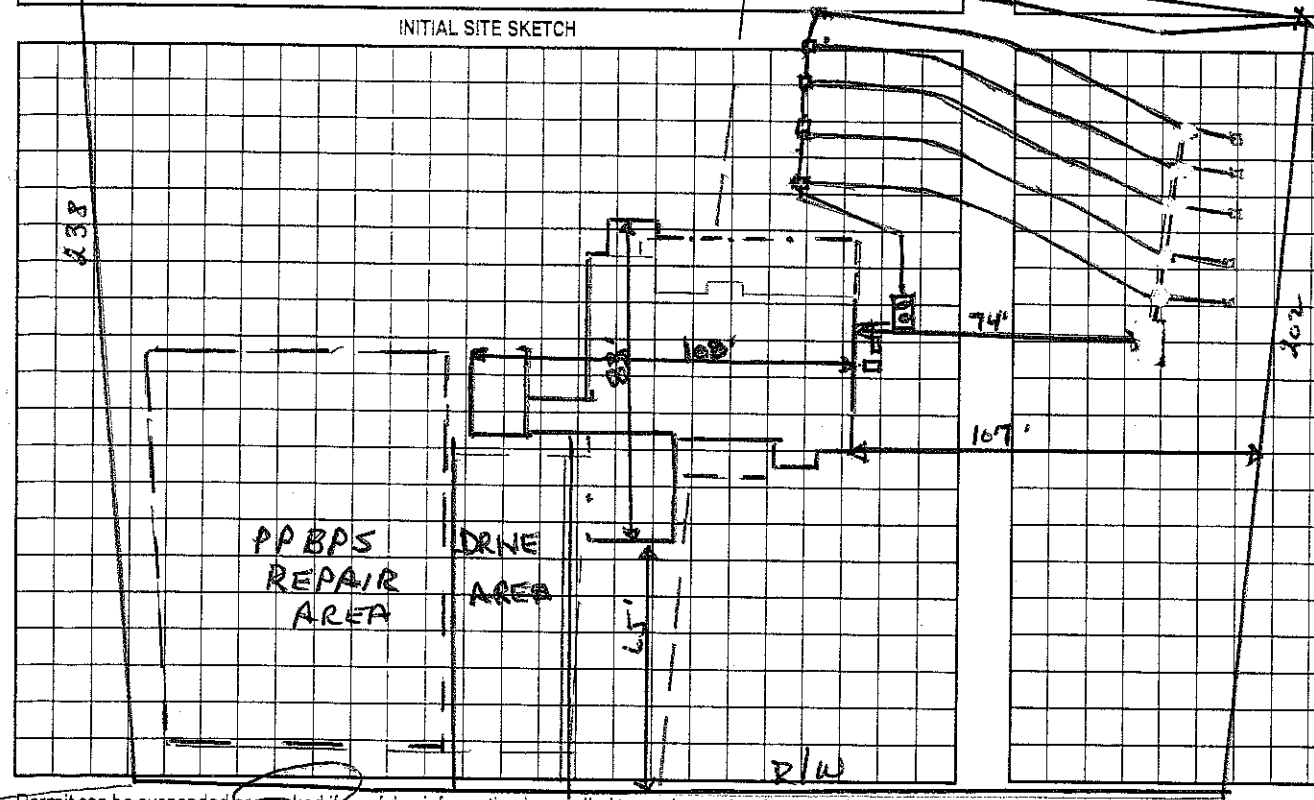
Comments/Conditions:

330'

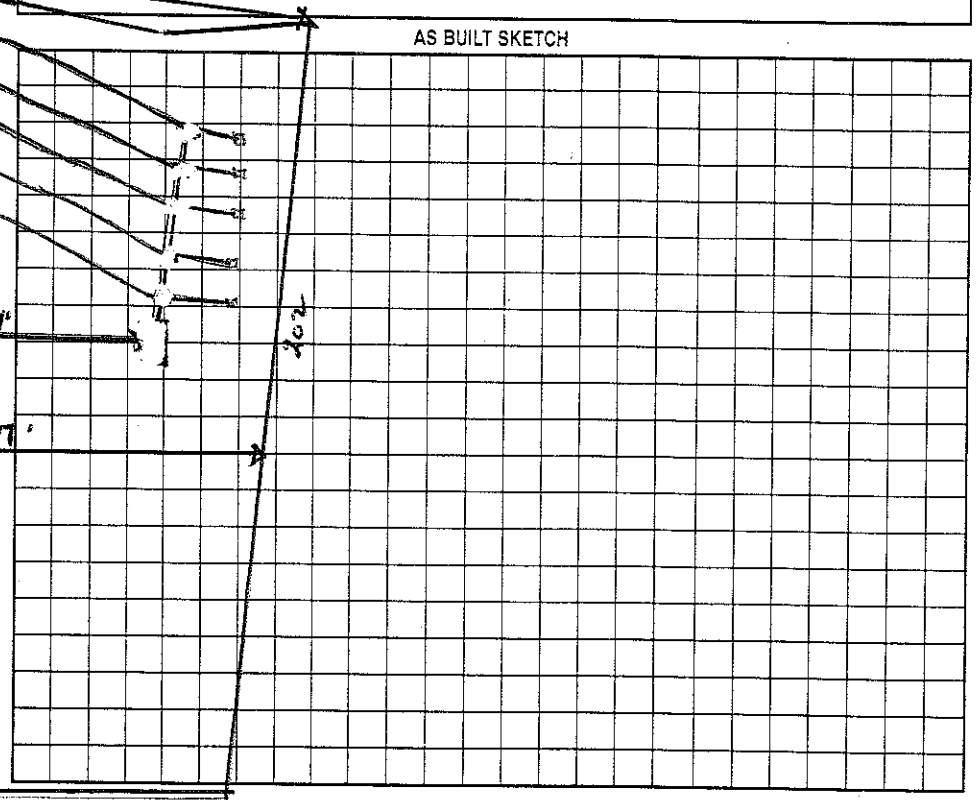
Comments/Conditions:

Changed 12/3/03 - AWS.

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: X _____ date 3-6-03 Installed by: A-1 Backhoe

STONEWALL BEACH LN.

Improvement Permit by: Wesley Sparks R.S. date 3/4/03 Operation Permit by: Wesley Sparks R.S. date 12/29/03

Authorization to Construct by: Wesley Sparks R.S. date 3/4/03 Existing System Inspection by: _____ date _____

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