IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 126494 PIN# 4626322353

OWNER OR CONTRACTOR Mid Atlantic Custom Builders PHONE: Business 704-202-5568 (Ray) Home 980-722-0230 (Bill) DATE 9-27-05

ADDRESS PO Box 3792 Mooresville 28117

LOCATION Brawley Sch Rd TR Chuckwood TR Indian Tr on right

SUBDIVISION Watertree Landing BLOCK / SECTION ____ LOT 24 LOT AREA .99 SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 10-18-05

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I (II) III, IV, V, VI

System Description: 25% reduction, gravity

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth NA ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

No. Bedrooms 4 No. Bathrooms ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

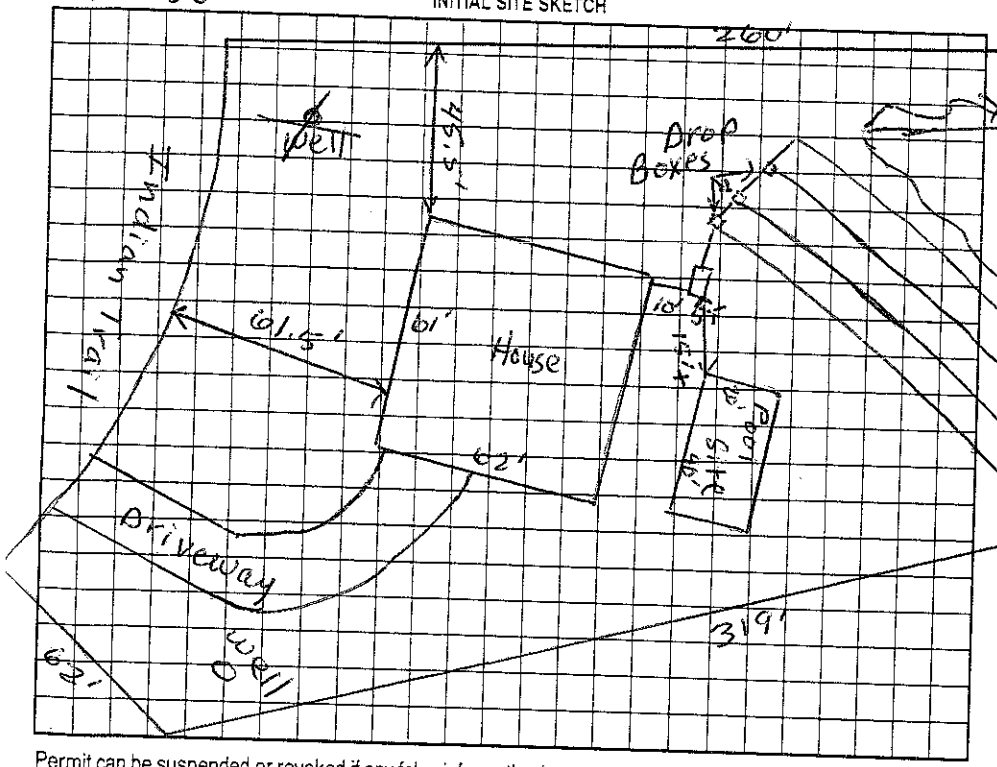
Trench lines to follow contour of the ground

Comments:/Conditions:

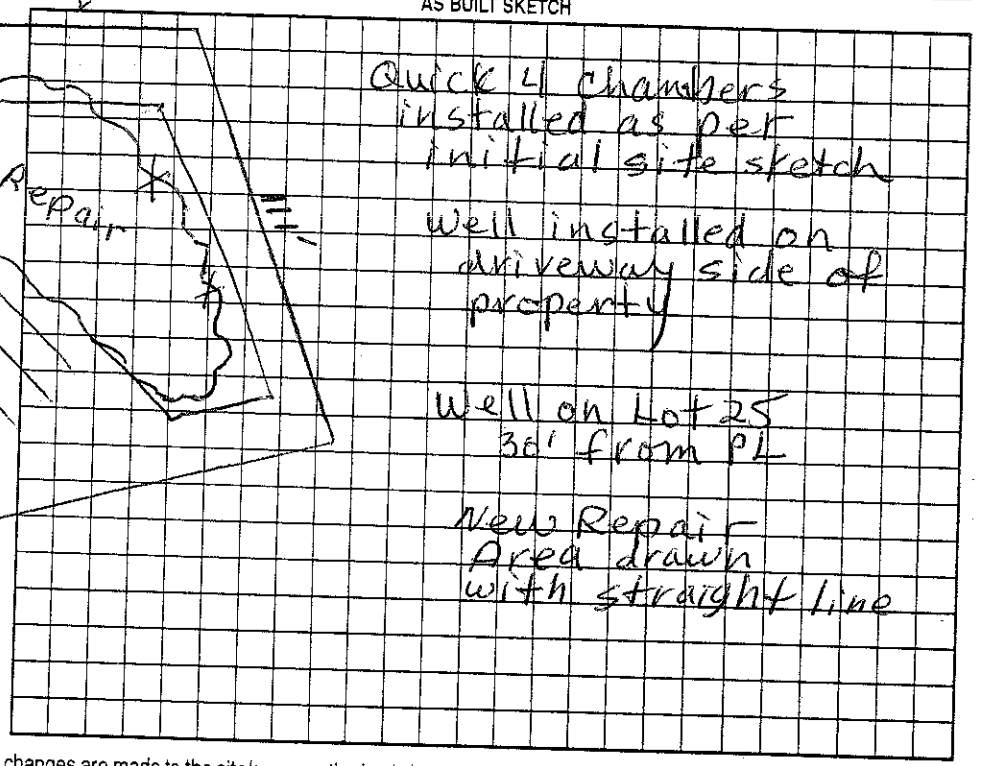
Yellow tuf-tite filter
Septic tank w/ marker

1" = 50'

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: Bill Bethune date 9-27-05 Installed by: Craig Thompson

Improvement Permit by: Judy Merrill date 9-27-05 Operation Permit by: Judy Merrill date 2-16-06

Authorization to Construct by: Judy Merrill date 9-27-05 Existing System Inspection by: ____ date ____

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