IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 113401 PIN# ~~4627-85-5496.000~~ 4627-77-6377 DATE 1/14/05

OWNER OR CONTRACTOR Select Properties PHONE: Business 704-947-8127 Home

ADDRESS 13318 Tokay Ct. Huntersville, NC 28078

LOCATION 150 W to Paradise Peninsula to Greenbay Rd., to lot 16 on (L) before Hogan Ln.

SUBDIVISION Greenbay Forest BLOCK / SECTION LOT 16 LOT AREA 1.99 Ac SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .25 Initial / .2 Repair

Septic Tank: 1000 Gallons; STB 794 Date 5/9/05
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1470 Linear Feet 490
No Lines 7 @ 70' Trench Width 3' Max Trench Bottom Depth (24") Gravel Depth No

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 25% Reduced
Repair System Description: PM to 25% Reduced
Maintenance Agreement Required: ☐ Yes ☒ No

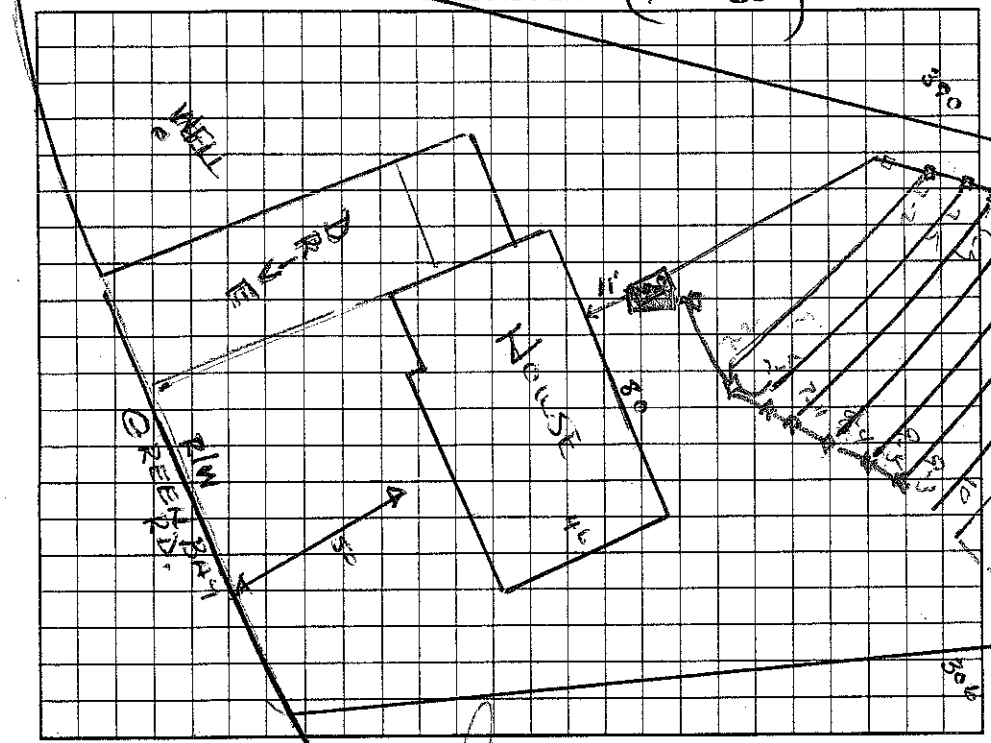
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

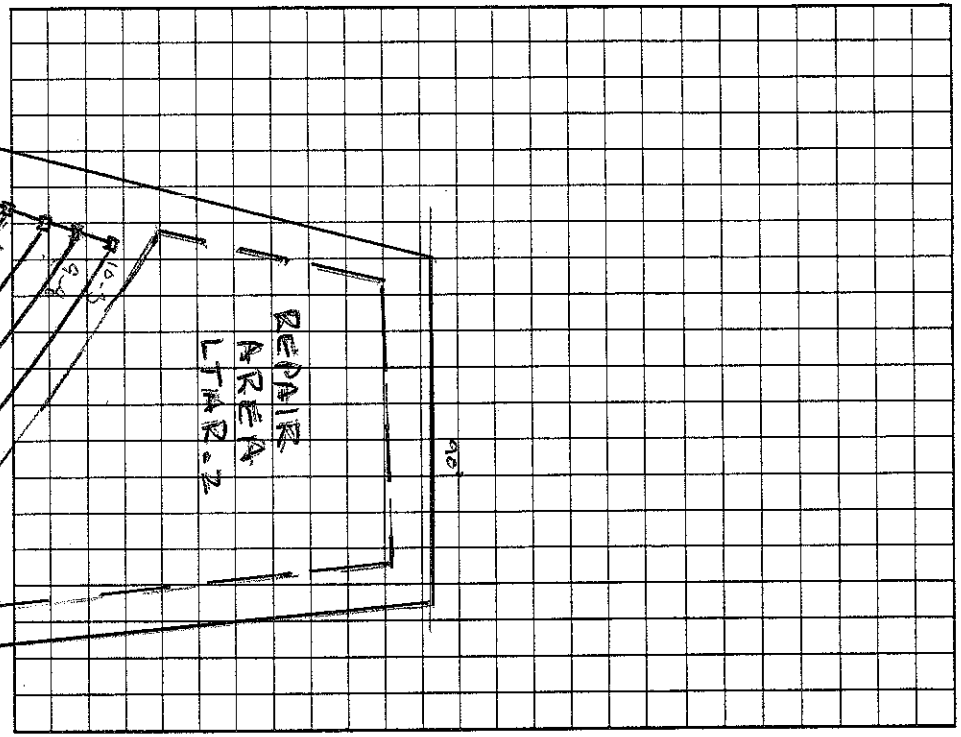
Comments:/Conditions: Maximum trench depth 24"

Comments:/Conditions:

INITIAL SITE SKETCH (1" = 50')



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: [signature] date 1-29-05

Improvement Permit by: Wesley Sparks RS. date 1/14/05

Authorization to Construct by: Wesley Sparks RS date 1/14/05

Installed by: Hallowm

Operation Permit by: Wesley Sparks RS date 6/20/05

Existing System Inspection by: date

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