IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 375.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 107375 PIN# ~~4627-90-7412.333~~ 4627-90-8594 DATE Aug 22, 02

OWNER OR CONTRACTOR Shavender Dev. Group PHONE: Business _____ Home _____

ADDRESS 1143-D Executive Dr. Cary N.C. 27511

LOCATION Brawley Sch. Rd. TR Blume TL Beaten Path TL Cicero TL Shavender TL Palmer Marsh TL Archbell on left

SUBDIVISION Shavenders Bluff BLOCK / SECTION 3 LOT 333 LOT AREA .72 Ac SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 7/8/03
Pump Tank: 1000 Gallons; PT 302 Date 8/7/03
Pump Make: Zoeller Model N-140 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270
No Lines 4 Trench Width 24" min 8' oc Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, ⓘ V, VI
System Description: LPPBPS
Repair System Description: Same
Maintenance Agreement Required: ☑ Yes ☐ No

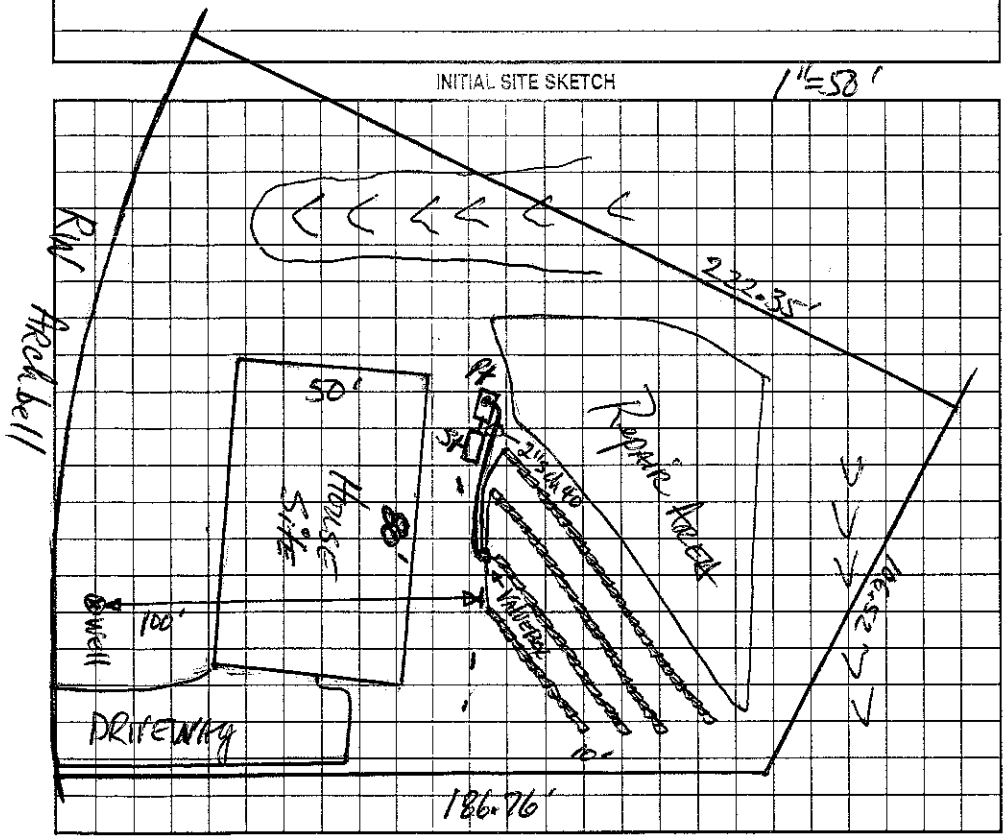
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments/Conditions: 36" pump 9' oc

Comments/Conditions: Lot 74, 79, 90 - 16" PPBPS shortened

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: _____ date 8-29-02 Installed by: Rawson Septic Tanks

Improvement Permit by: _____ date 8-22-02 Operation Permit by: Wesley Sparks R.S. date 1/20/04

Authorization to Construct by: Wesley Sparks R.S. date 3/27/03 Existing System Inspection by: _____ date _____

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