IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12530 PIN# 4629-58-2744 DATE 12-30-04

OWNER OR CONTRACTOR JOHN STELLMACH PHONE: Business Home 704-408-0343

ADDRESS 19900 SHORTWATER POINTE DR Cornelius NC 28031

LOCATION STATE PARK RD (L) Wildlife RD (R) Silver Woods (L) DEER RUN LOT # 28 on RT

SUBDIVISION Wildlife Bay BLOCK / SECTION I LOT 28 LOT AREA 28967 SF SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1017 Date 2-14-05

Pump Tank: 1000 Gallons; PT 14 Date 4-6-05

Pump Make: Goulds Model WE0511 Serial No. 506073352

Nitrification Field: No Fields 1 Square Feet EBZ-1600' Linear Feet 270'

No Lines 3x90' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LOW PRESS SD w/ REDUCT

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

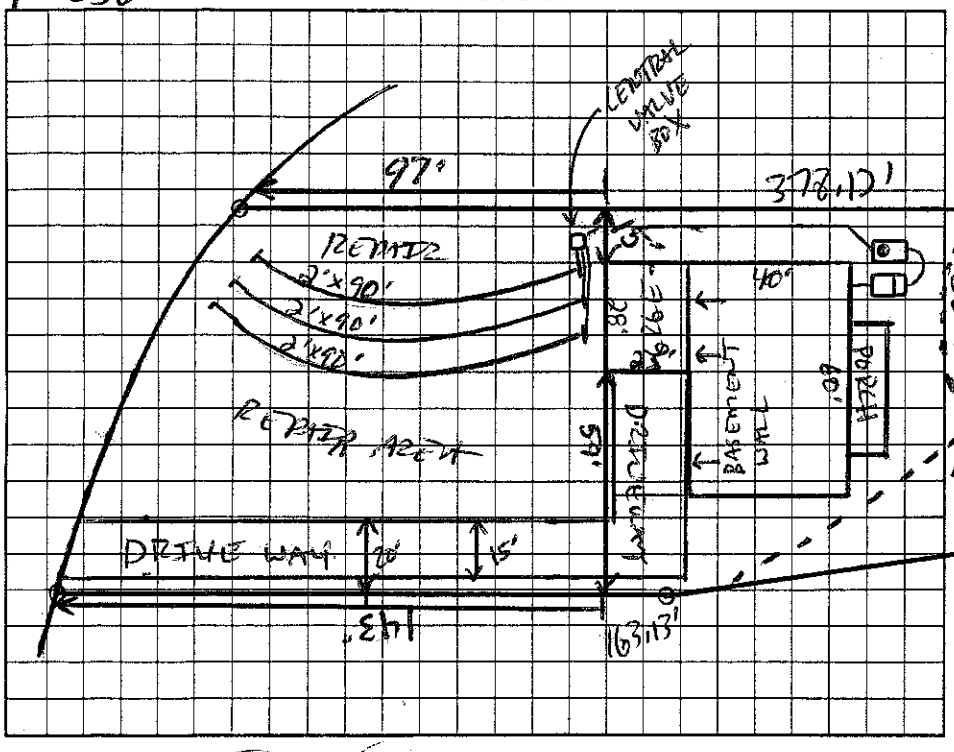
Water Supply: ☐ Individual ☐ Public ☒ Community

Comments:/Conditions: (1) KEEP BASEMENT CUT SHALLOW ENOUGH SD TANKS PLACEMENT & SETBACKS CAN BE MAINTAINED (2) INSTALL LINES ON CONTOUR & MAINTAIN SETBACKS (3) CALL PSTOR TO INSTALLATION FOR PUMP SIZING & SYSTEM SPECS IF NECESSARY.

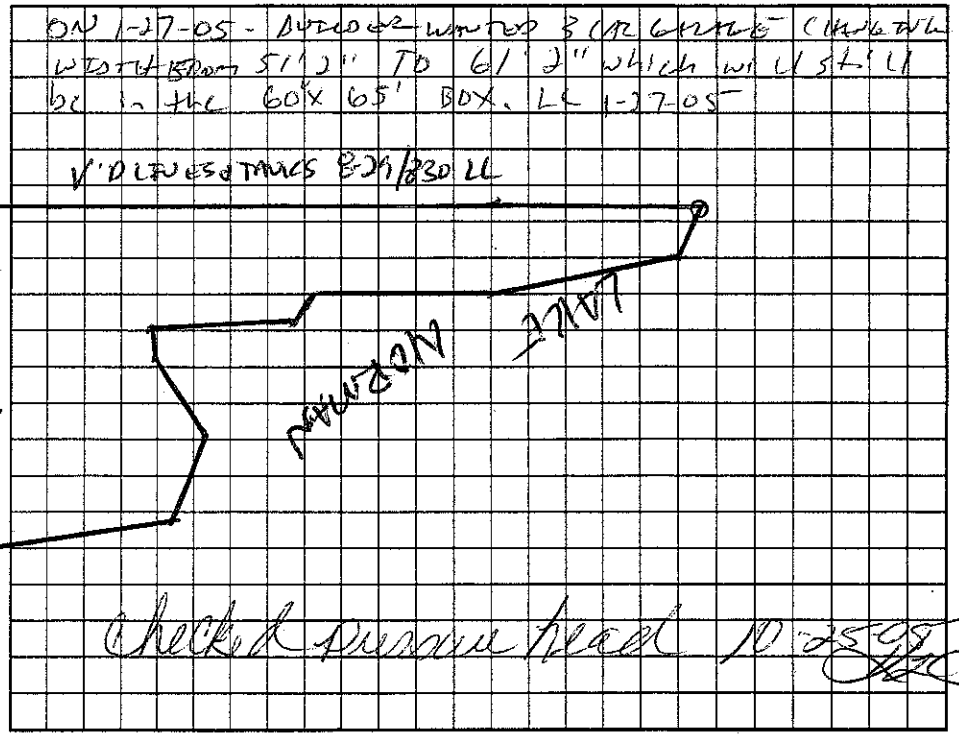
Comments:/Conditions: (4) Approved 55' x 52' 4 BEDROOM PLAN; KEEP BACK OF HOME IN SAME LOCATION ALLOWING MORE ROOM FOR THE SEPTIC.

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: _____ date 12/30/04 Installed by: C&S GRADING

Improvement Permit by: _____ date 12-30-04 Operation Permit by: _____ date 10-28-05

Authorization to Construct by: _____ date _____ Existing System Inspection by: _____ date _____

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