IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 137472 PIN# ~~4629-68-0592~~ 4629-68-1176 DATE 2-5-07

OWNER OR APPLICANT ROWLAND DEVLPMT GROUP PHONE: Business 704-799-1907 Home 704-202-1176

ADDRESS 6240 S. MAIN ST SALISBURY NC

LOCATION State Park RD (L) Wildlife RD (R) Silver Woods (L) DEER RUN (L) PROPERTY ON RIGHT END

SUBDIVISION Wildlife BAY BLOCK / SECTION 1 LOT 17 LOT AREA _____ SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 1.3

Septic Tank: 1000 Gallons; STB 825 Date 6-2-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 4 Square Feet EQ=1600 Linear Feet 280'

No Lines 4 SPLIT Trench Width 24" Max Trench Bottom Depth 36"

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

System Description: 60% TRENCH 50% REDUCT

Repair System Description: LP 50% REDUCT

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons 8

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☐ Public ☒ Community

Gravel Depth N/A ☐ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

(1) BUILDER SHOWED ME BASEMENT GRADE AND IT WILL NOT INTERFERE WITH SYSTEM

(2) HOUSE & SYSTEM FLAGGED OUT COMPLETELY

(3) MEETS SETBACKS

Comments:/Conditions:

Blue Flags

INITIAL SITE SKETCH

SEE ATTACHED DESIGN SHEET BY LORNE COOK, R.S.

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 2-6-07

Improvement Permit by: _____ date 2-5-07

Authorization to Construct by: _____ date 2-5-07

Installed by: Rowan Septic

Operation Permit by: _____ date 7-20-07

Existing System Inspection by: _____ date _____

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

LOT 17 Wildlife BAY

137472

4629 68 0292

