IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14183 PIN# 4636433261 DATE 4-5-07

OWNER OR APPLICANT Michael Ditto PHONE: Business 704-840-6932 Home 704-948-1864

ADDRESS 12909 Fallcross Court Huntersville NC

LOCATION Brawley School Rd TL Stutts TR Poinsettia TR Oasis on left

SUBDIVISION Stutts Cove BLOCK / SECTION 2 LOT 31 LOT AREA 1.13 SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3 gpd/ft2

Septic Tank: 1000 Gallons: STB 1012 Date 5/6/07

Pump Tank: 1000 Gallons: PT 17 Date 9/11/07

Pump Make: Gould's Model WE05512HAU Serial No K078C883

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 200

No Lines 5@40' Trench Width 24" Max Trench Bottom Depth 36"

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

System Description: PPBPS pm LP ✱

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons 6

☐ Business No. Employees

☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

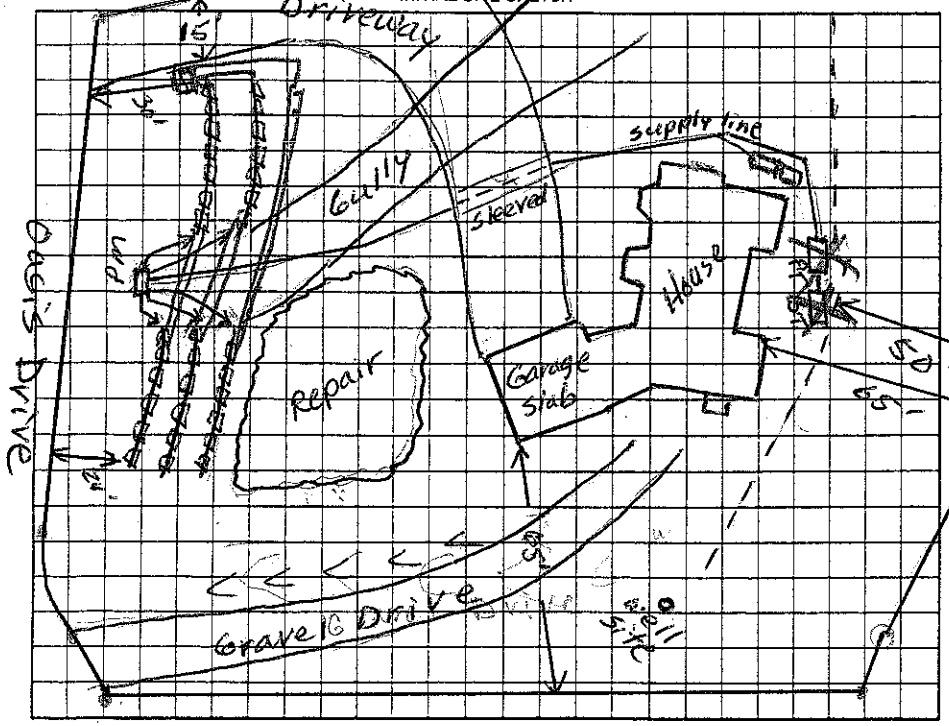
Gravel Depth NA ☐ Gravity ☒ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: pvc may be used under drive if it has 30" compacted cover, otherwise ductile iron

1"=50'

Comments:/Conditions: Bed, 3/16 holes, Low Pressure ✱

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: Michelle Kelly date 4/19/07 Installed by: Piedmont Backhoe - Steve Jordan

Improvement Permit by: Judy Merrill date 4-5-07 Operation Permit by: W. Lyle Sparks RS date 3/28/08

Authorization to Construct by: Judy Merrill date 4-5-07 Existing System Inspection by: _____ date _____

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