IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 11953 PIN# ~~4637166015.016~~ 4637-15-0443 DATE 8-4-05

OWNER OR CONTRACTOR McCrary Partners LLC / Ray Short PHONE: Business 799-9770 Home

ADDRESS PO Box 3608 Mooresville 28117

LOCATION 150 West - TL McCrary - TR Riverwood - on Right

SUBDIVISION McCrary Woods BLOCK / SECTION 1 LOT 16 LOT AREA .75 Ac SITE CLASS. PS DESIGN FLOW 480 GPD L.T.A.R. .13 GPD/Ft²

Septic Tank: 1000 Gallons; STB 312 Date 2-24-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet ____ Linear Feet 270'
No Lines 6@45' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth NA

☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: Panel Gravity
Repair System Description: LP Panel
Maintenance Agreement Required: ☐ Yes ☒ No

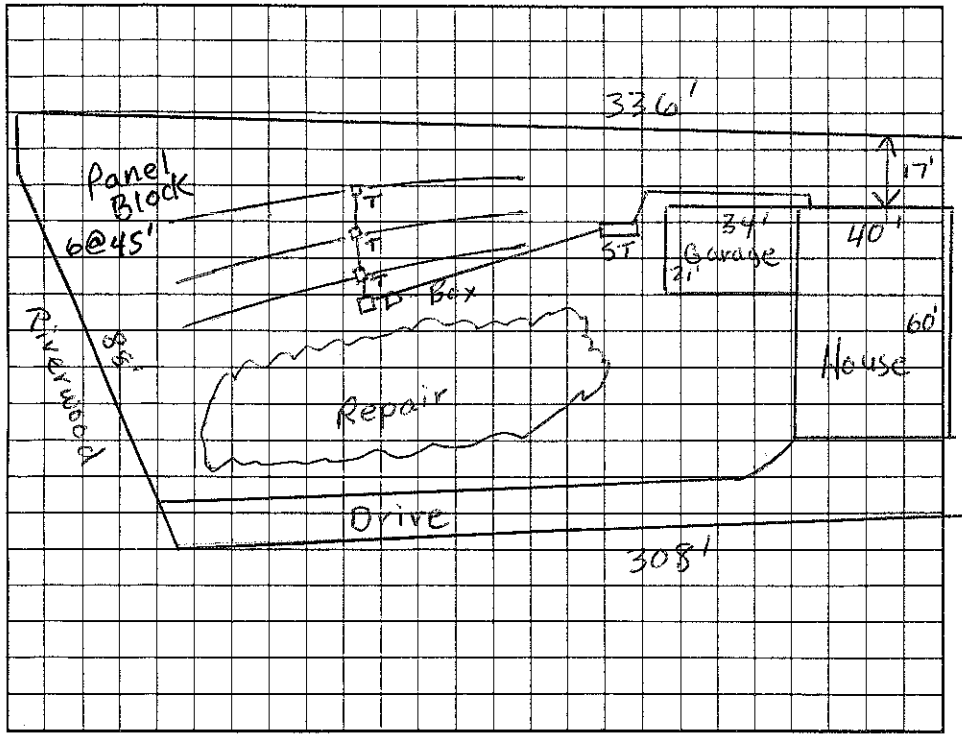
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

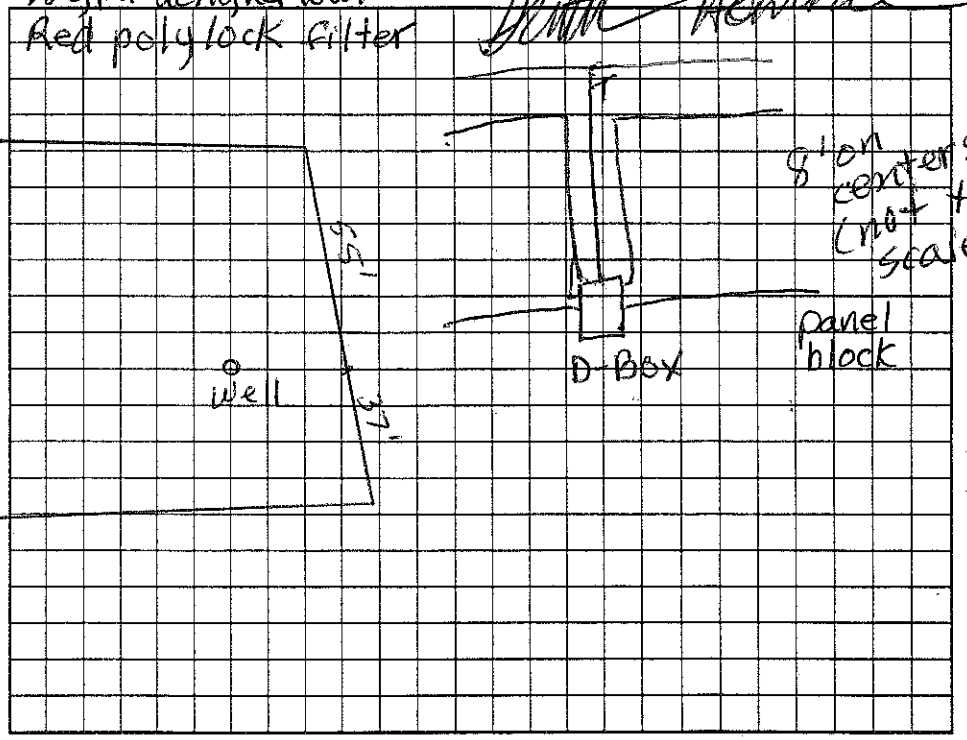
Comments:/Conditions:

Comments:/Conditions: Tank with risers & marker
System installed with D-Box w/ 5 levelers and tee at bottom 2 lines. Installer stands behind the D-Box & T design to work for 480 gpd design flow.

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 8/8/05 Installed by: Howard's Backhoe

Improvement Permit by: Judy Melville date 8-4-05 Operation Permit by: Judy Melville date 9-1-05

Authorization to Construct by: Judy Melville date 8-4-05 Existing System Inspection by: ____ date ____

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

Inspection passed 9-1-05