130 1:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 119539 PIN# ~~4637 16 6015 012~~ 4637-15-2837 DATE 7/16/04

OWNER OR CONTRACTOR McCRARY PARTNERS / Mid-Atlantic Builders PHONE: Business 799-9770 Home

ADDRESS PO BOX 3608 MOORESVILLE NC 28117

LOCATION 150 WEST - TL McCRARY - TR RIVERWOOD - AT END

SUBDIVISION McCRARY WOODS BLOCK / SECTION 1 LOT 12 LOT AREA .98 AC SITE CLASS. PS DESIGN FLOW 480 GPD L.T.A.R. .36 GPD/FT2

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: ~~GRAV~~ GRAVITY 25% REDUCTION

Repair System Description: LP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees

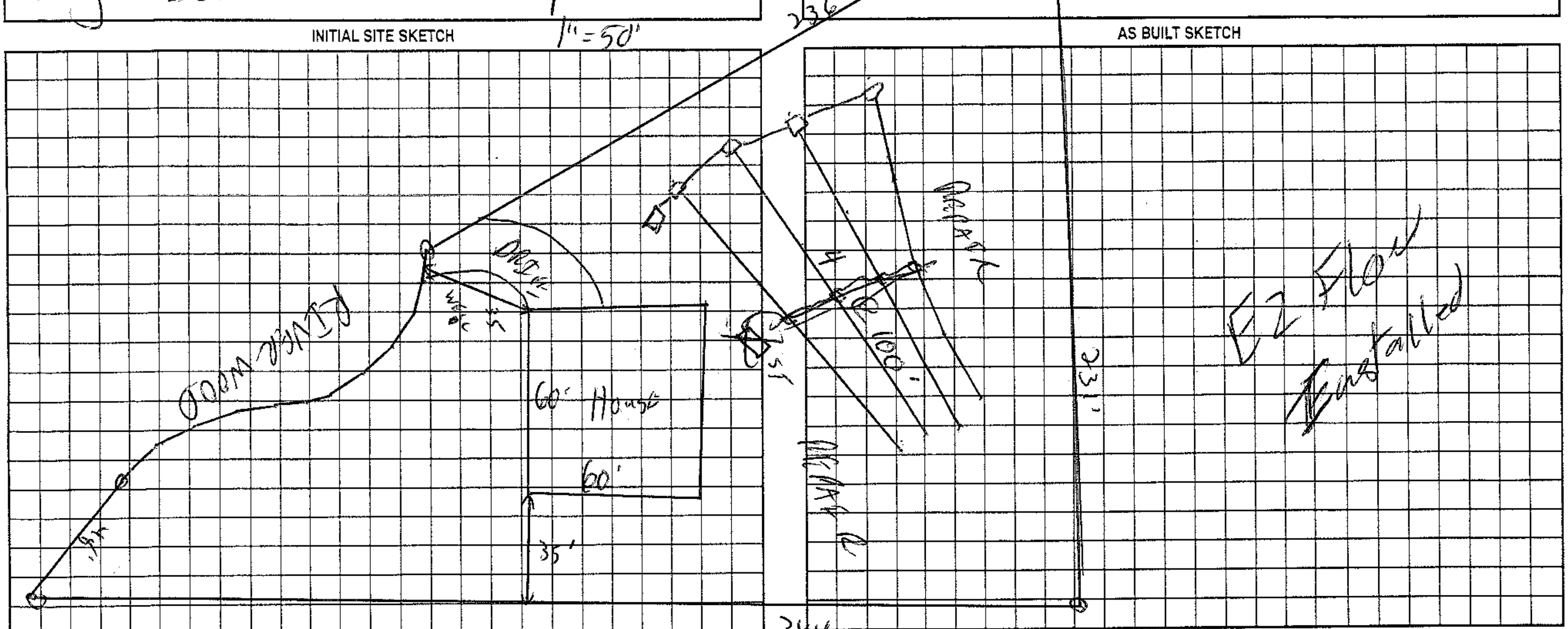
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: 12/30/04 Reviewed plans; essentially in compliance with Improvement permit. House slightly larger but still should fit as permitted.

Comments:/Conditions:

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: [signature] date 8-3-04 Installed by: Howard's Backhoe

Improvement Permit by: [signature] RS date 7/16/04 Operation Permit by: [signature] RS date 3/31/05

Authorization to Construct by: [signature] RS date 12/30/04 Existing System Inspection by: date

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