IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 146302201825 PIN# 4637251453.017 4637-15-9149 DATE 11-27-07

OWNER OR APPLICANT Lakeland Luxury/True Homes PHONE: Business _____ Home _____

ADDRESS 16405-D Northcross Dr. Huntersville NC 28078

LOCATION Hwy 150 W Th McCrary on left

SUBDIVISION Riverwood Bend BLOCK / SECTION _____ LOT 17 LOT AREA .576 Ac SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3 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"

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

System Description: 25% reduction gravity

Repair System Description: LP PPBPS

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

Comments:/Conditions:

System 100'+ from well

Comments:/Conditions: 3/12/14 Reviewed Site plan & floor plans, in compliance with original Septic plan for 4 Bedroom House.

INITIAL SITE SKETCH

See plan from SAME

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 12/6/07

Improvement Permit by: _____ RS date 11-27-07

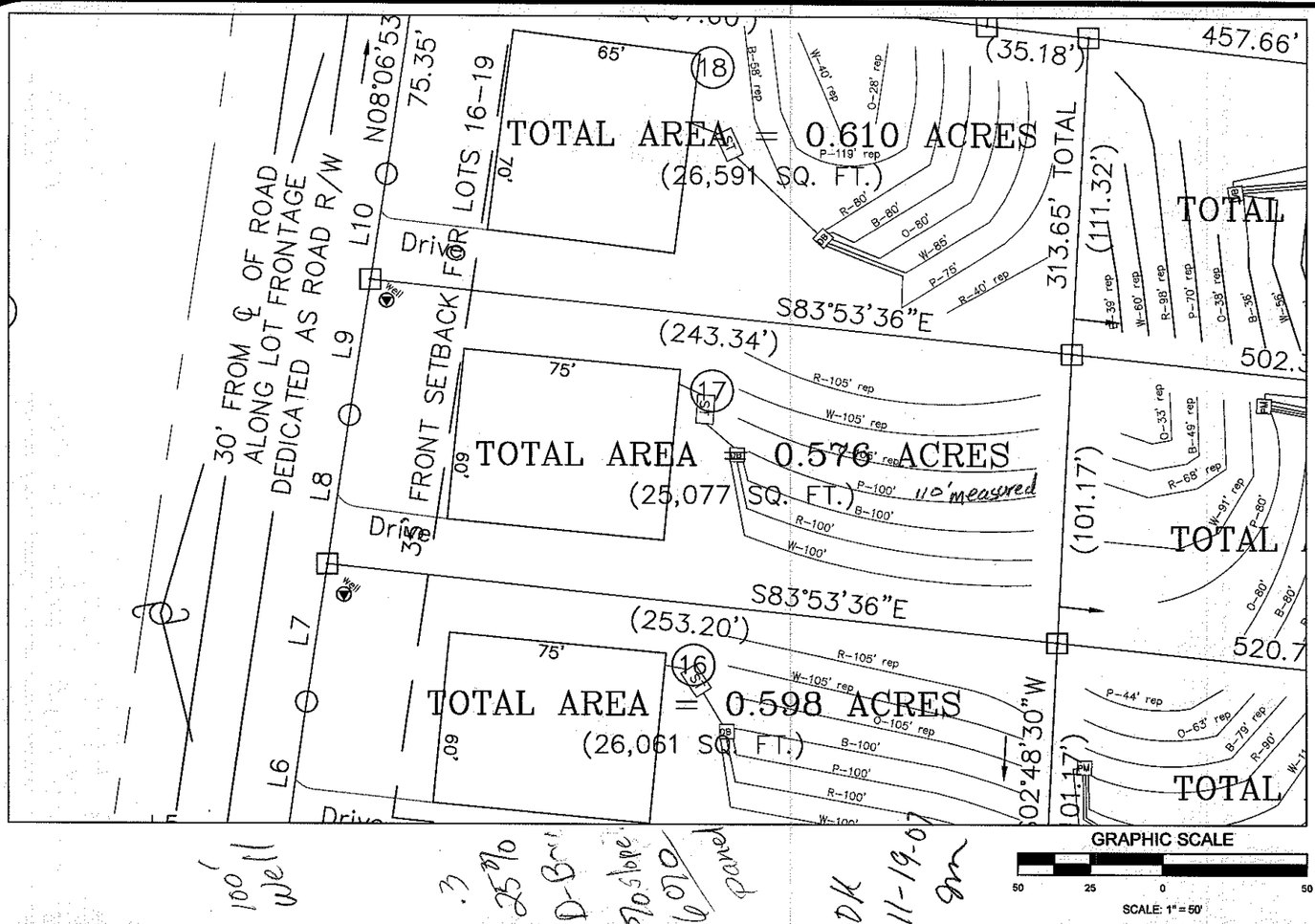
Authorization to Construct by: _____ date 3/12/14

Installed by: _____

Operation Permit by: _____ date 7-1-19

Existing System Inspection by: _____ date _____

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



SCALE: 1" = 50'	DATE: 11-14-07	S&ME	Lot 17	FIGURE NO. 1
PROJECT NO. 1588-07-051	DRAWN BY: JBP	3718 OLD BATTLEGROUND ROAD GREENSBORO, NC 27410 PH. 336-288-7180 FAX. 336-288-8980 WWW.SMEINC.COM	Riverwood Bend Subdivision – McCrary Rd. Iredell County, NC	
	CHECKED BY: PLM			