IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 COPY MOORESVILLE 704-664-5281 10 30

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

PERMIT# 072877 PIN# 4638 09 7315 DATE 1/3/00

OWNER OR CONTRACTOR Michael Berry PHONE: Business 528-0061 Home

ADDRESS 154 Lewis Dr. Troutman, NC. 28166

LOCATION Perth N TL Fern Hill Rd. TL 2ND Broadview 2ND lot on (L)

SUBDIVISION BROADVIEW BLOCK / SECTION LOT 11 LOT AREA .97AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 6/6/01

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 5 @ 80' Trench Width 3' Max Trench Bottom Depth 30" Gravel Depth SAND

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

System Description: Gravity - 25% reduced

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2.5

☐ Business No. Employees

☐ Other

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

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

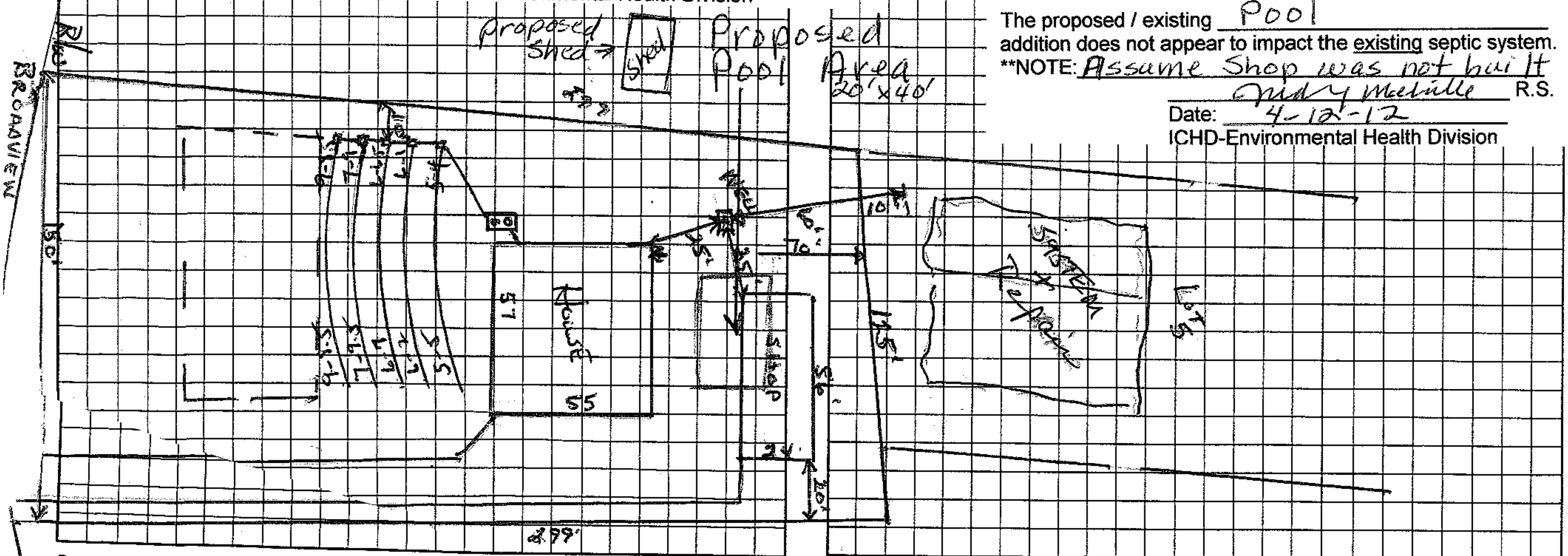
The proposed / existing Shed addition does not appear to impact the existing septic system.
**NOTE: Shall be min. 25' from well
Andy Melville R.S.
Date: 4.17.12
ICHD-Environmental Health Division

Comments:/Conditions:

(1" = 50')

AS BUILT SKETCH

The proposed / existing Pool addition does not appear to impact the existing septic system.
**NOTE: Assume Shop was not built
Andy Melville R.S.
Date: 4-12-12
ICHD-Environmental Health Division



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: * M B Berry date

Installed by: Wayne Clontz

Improvement Permit by: Wesley Sparks R.S. date 1/3/01

Operation Permit by: Wesley Sparks R.S. date 7/31/01

Authorization to Construct by: Wesley Sparks R.S. date 1/3/01

Existing System Inspection by: date

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