9:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # REPAIR PIN # 4639-49-8356 DATE 4-27-09

OWNER or APPLICANT MICHAEL DOUGLAS PHONE: Business 704-528-7730 Home:

OWNER or APPLICANT ADDRESS 268 WINDING SHORES

LOCATION / DIRECTIONS PERTH TO NEIL FARM TO WINDING SHORES

SUBDIVISION CLIFT BLOCK / SECTION 16 LOT # 137 LOT AREA .89AC DESIGN FLOW 240 L.T.A.R. .4

Septic Tank EXISTING Pump Tank 1000 274 3-3-09 Pump Make ZOELLER ½ HP Nitrification Field No Fields 1 No Line 7 Linear Feet 285 Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth —

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

System Description:

Repair System Description: PM - 25% REDUCTION

Maintenance Agreement Required ☐ YES ☒ NO

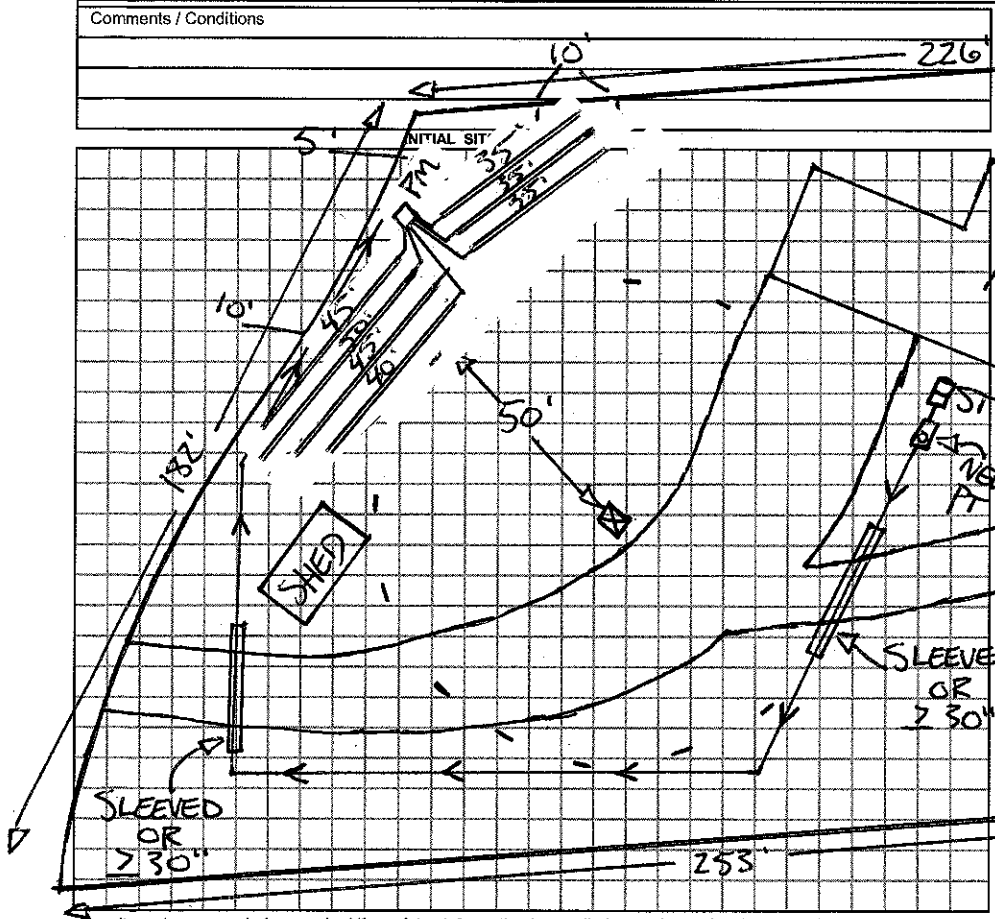
☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 2 ☐ Business No. Persons ☐ Other No. Employees ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement w/o plumbing

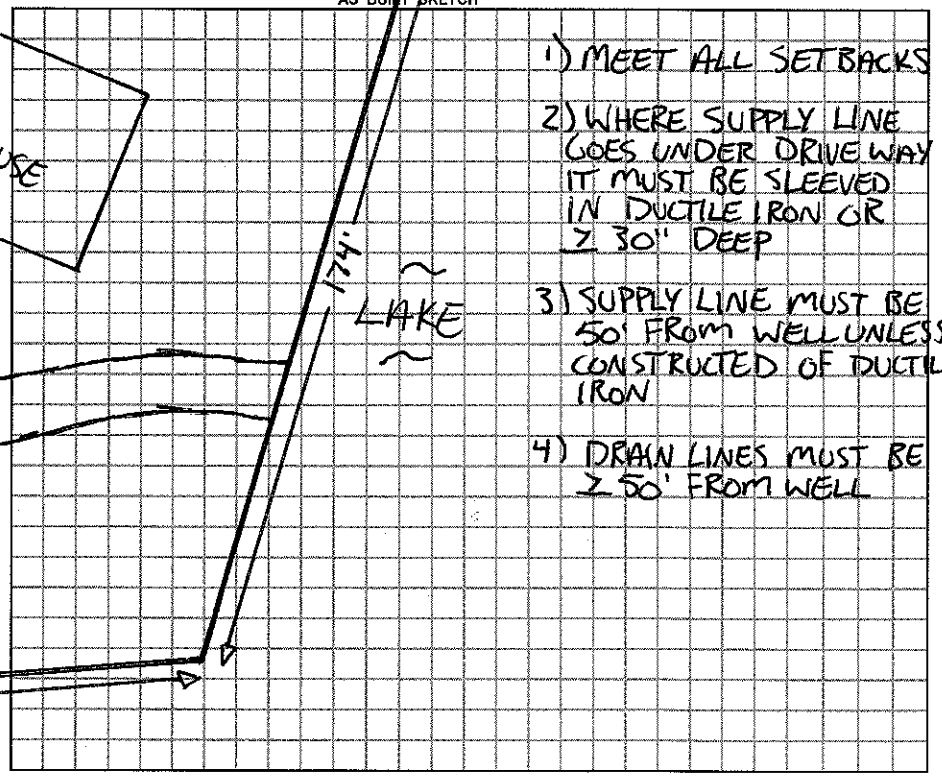
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions

Comments / Conditions



AS BUILT SKETCH



1) MEET ALL SETBACKS

2) WHERE SUPPLY LINE GOES UNDER DRIVE WAY IT MUST BE SLEEVED IN DUCTILE IRON OR > 30" DEEP

3) SUPPLY LINE MUST BE 50' FROM WELL UNLESS CONSTRUCTED OF DUCTILE IRON

4) DRAIN LINES MUST BE > 50' FROM WELL

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 w / plat valid without expiration.* ☒ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☒ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Michael W. Douglas Date 4-28-09

Improvement Permit by: B. A. Date 4-27-09

Authorization to Construct by: B. A. Date 4-27-09

Installed by: ALEXANDER PRECAST

Operation Permit by: B. A. Date: 5-21-09

Existing System Inspected by: Date:

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant