IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 154783 PIN # 4639-64-0340.063 DATE 2-17-09

OWNER or APPLICANT SHAVENDER ~~DEV. GROUP~~ John Grigoni PHONE: Business Home:

OWNER or APPLICANT ADDRESS 1143 D EXECUTIVE DR CARY NC 27511

LOCATION / DIRECTIONS PERTH RD, TL FERN HILL, TL NORTHINGTON WOODS DR, TL WATERBERY, CORNER OF WATERBURY + WHISPERING COVE

SUBDIVISION NORTHINGTON WOODS BLOCK / SECTION LOT # 63 LOT AREA 1.369AC DESIGN FLOW 480 L.T.A.R. .3

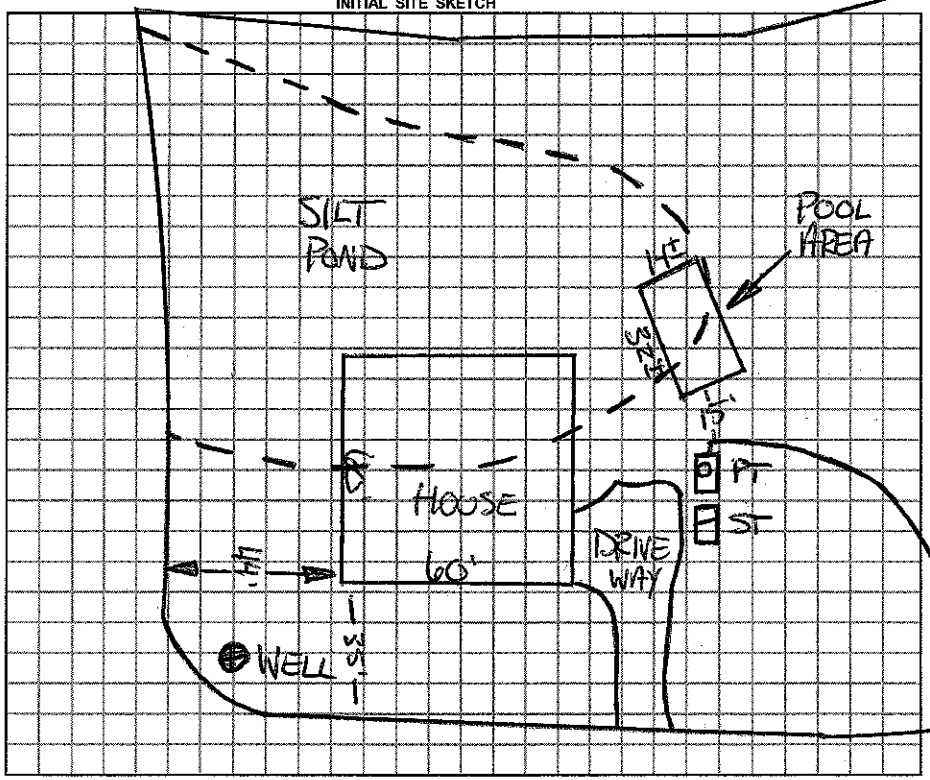
Septic Tank	1000	Gallons: STB	794	Date	9-19-08	[X] New System	[ ] Repair	[ ] Expansion System	Type I II III IV V VI
Pump Tank	1000	Gallons: PT	283	Date	7-29-08	System Description:	PM 25% REDUCTION		
Pump Make	GOULDS	Model	PESIM	Serial #	½ HP	Repair System Description:	SAME		
Nitrification Field	No Fields 1	No Lines	4	Linear Feet	400'	Maintenance Agreement Required	[ ] YES	[X] NO	
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	—	[ ] GRAVITY	[X] PRESSURE		

[X] Residence	No. Bedrooms	4	Water Supply
[ ] Business	No. Persons		[X] Private
[ ] Other	No. Employees		[ ] Public
[ ] Slab	[X] Crawl Space		[ ] Community
[ ] Basement w/plumbing	[ ] Basement w/o plumbing		

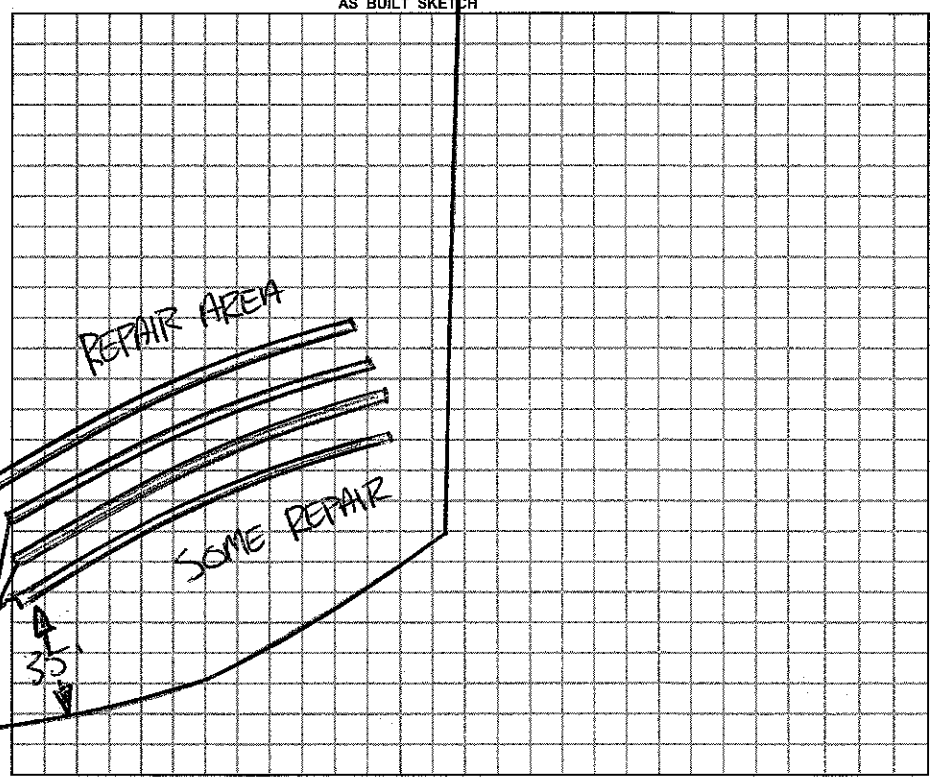
Comments / Conditions: POOL MUST BE 15' FROM ANY PART OF SEPTIC SYSTEM

Comments / Conditions:

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

Owner / Applicant Signature: [signature] Date 2-23-09

Improvement Permit by: [signature] Date 2-17-09

Authorzation to Construct by: [signature] Date 2-17-09

Installed by: RICHARD ABERNATHY

Operation Permit by: Wesley Sparks R.S. Date: 5/4/09

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