IREDELL COUNTY HEALTH DEPARTMENT

ST VILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTR . / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 122648 PIN# 4639-64-0340.063 DATE April 8, 05

OWNER OR CONTRACTOR Shoemaker New Group PHONE: Business Home

ADDRESS 1143 N. Executive Circle, Cary N.C. 27511

LOCATION North Rd N. TL Fern Hill TL Northington Woods DR. TL Waterbuying Dr. TL Whispering Cove Ct. 1st lot on left

SUBDIVISION Northington Woods BLOCK / SECTION LOT 63 Revised LOT AREA 1.369 Ac SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. 3

Septic Tank: 1000 Gallons; STB 794 Date 9-19-08

Pump Tank: 1000 Gallons; PT 283 Date 7-29-08

Pump Make: Goulds ½HP Model PESIM 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 NA

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

System Description: Am 25% Reduction

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

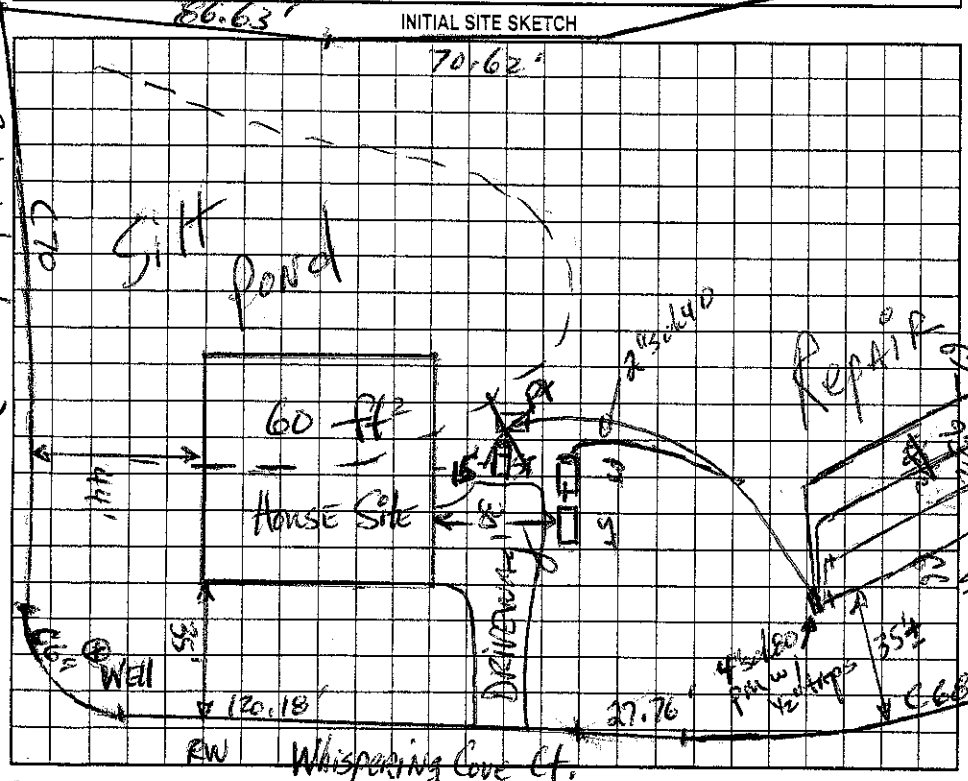
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Lot 63 Revised is a combination of the original lots 62 & 63.

Comments:/Conditions: ☆ Keep Drainfield at least 15ft off PL. (100Ft from any well including Neighbors)

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 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 5/16/05 Installed by:

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date 10-20-08 Existing System Inspection by: date

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