IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 225 MSVL PIN# 4645592250 4645-49-1005 Chris DATE 3-11-05

OWNER OR CONTRACTOR St. Lawrence Homes PHONE: Business 892-7700 Home 201-9297

ADDRESS 7930 W. Kentar Cir Huntersville, NC 28078

LOCATION Hwy 21 TL Alcove TR Templeton TR Templeton Bay TL Huntfield Way at end

SUBDIVISION Templeton Bay BLOCK / SECTION ____ LOT 13 LOT AREA .87 Acres SITE CLASS: PS DESIGN FLOW 600 gpd L.T.A.R. .3

Septic Tank: 1500 Gallons: STB 338 Date 6-18-05
Pump Tank: 1500 Gallons: PT 477 Date 1-2-05
Pump Make: Myers Model ME50S Serial No 253270
Nitrification Field: No Fields 1 Square Feet 672-1008 Linear Feet 336'
No Lines 4 @ 84' Trench Width 24"-36" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Pump-LP-Panel Block
Repair System Description: Same
Maintenance Agreement Required: X Yes ☐ No

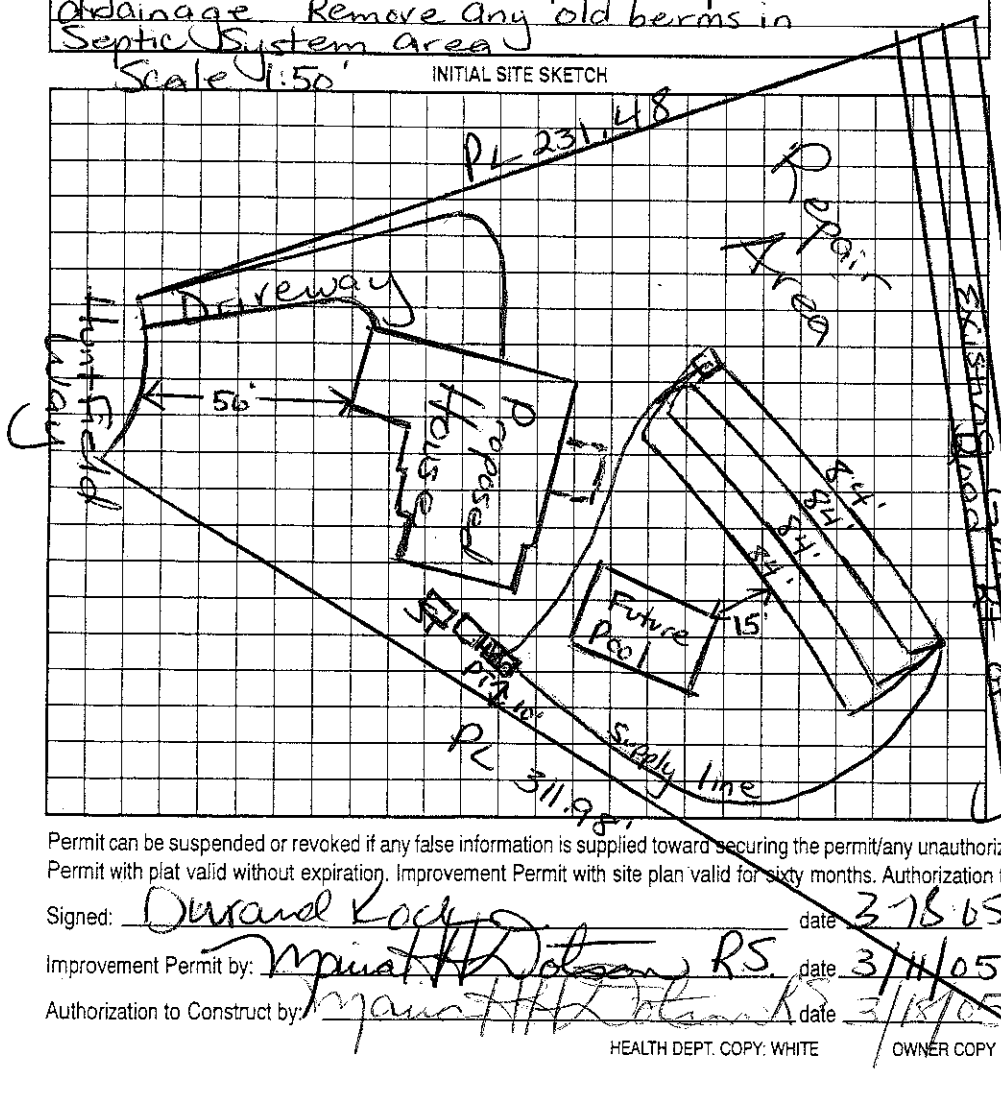
X House/Mod. Home No. Bedrooms 5
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public X Community

Comments/Conditions: Do not cut house site. Backfill against foundation to provide positive drainage. Remove any old berms in Septic System area.

Scale 1:50'

INITIAL SITE SKETCH



Comments/Conditions: Note: Keep Septic System 15' From "Future Pool" Area. Supply line can be 10' From pool & 5' From Property line. Checked tanks & lines 7/22/05 MJD

AS BUILT SKETCH

Checked pressure, elect & alarm 8/4/05
Installed as Drawn

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: Durand Kocy date 3-18-05 Installed by: K Hall RS 8/4/05

Improvement Permit by: Mana H Dotson RS date 3/11/05 Operation Permit by: Mana H Dotson date

Authorization to Construct by: Mana H Dotson RS date 3/18/05 Existing System Inspection by: ____ date ____

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