IREDELL COUNTY HEALTH DEPARTMENT

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

$80 IN

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

PERMIT# 104129 (11465) PIN# ~~4649-75-0566-20~~ 4649-65-2477 DATE 7-18-03

OWNER OR CONTRACTOR Fleetwood Homes (Sharon Patterson) PHONE: Business 528-7126 Home

ADDRESS 1040 Charlotte Hwy Troutman, NC 28166

LOCATION Hwy 115/21 North JTL Flowerhouse TL Rankin Hill TR Laramie Ct at end

SUBDIVISION Magic Forest BLOCK / SECTION LOT 20 LOT AREA 1.28 Acre SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. 3 Initial / 1.25 Repair

Septic Tank: 1000 Gallons; STB 1012 Date 1/26/03
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description Gravity/Pump - Innovative
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Bathrooms 2 No. Employees

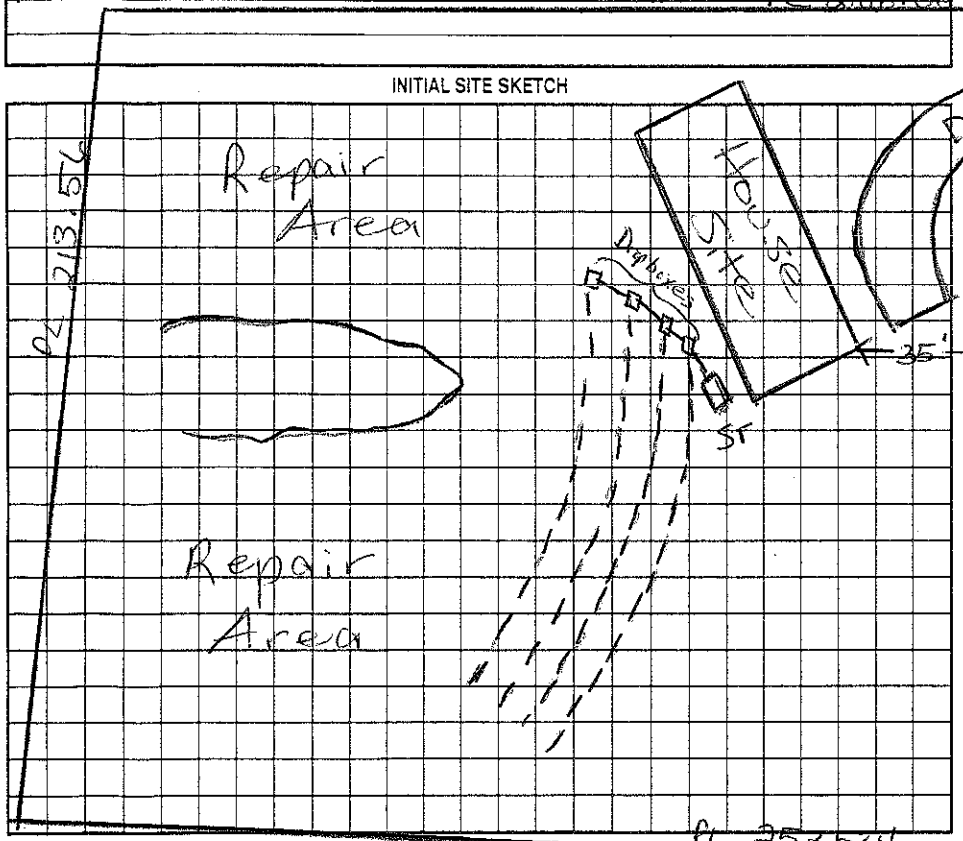
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

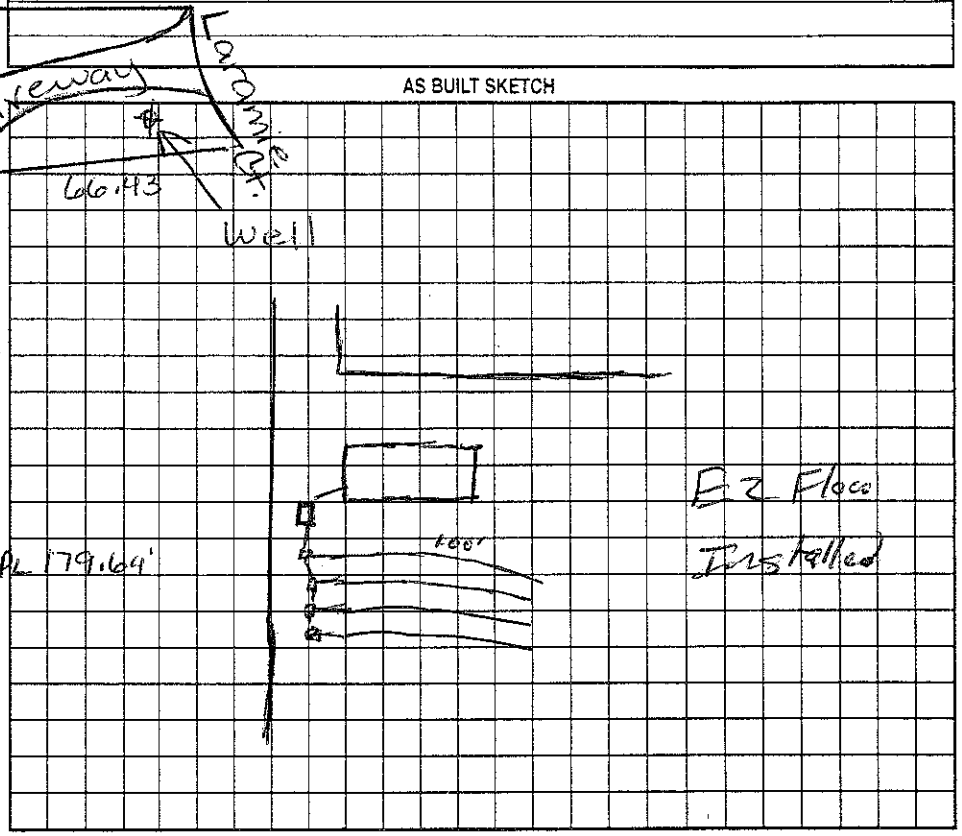
Comments/Conditions: Keep Septic system at least 10' from PL & 100' to well. Scale 1:50 PL 281.08

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 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 7/25/03 Installed by: Craig Thompson

Improvement Permit by: RS date 7/18/03 Operation Permit by: RS date 8/26/03

Authorization to Construct by: RS date 7/18/03 Existing System Inspection by: date

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