3:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 074657 PIN# ~~4649 66 7891 (PT)~~ 4649679058 DATE 8/16/98

OWNER OR CONTRACTOR Piedmont Housing PHONE: Business 528-7120 Home

ADDRESS 1040 Charlotte Hwy Troutman, NC. 28166

LOCATION 115-24 N TL Flowers Home Loop, TL Rankin Hill Rd. 3RD lot on (R)

SUBDIVISION Westwind BLOCK / SECTION 1 LOT 10 LOT AREA .49AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB W/S Date 6/30/98
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900* Linear Feet *300
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND

[X] New System [ ] Repair System Type: I, II, (III) IV, V, VI
System Description: GRAVITY - CH PLASTIC
Repair System Description: GRAVITY - 16" PABS
Maintenance Agreement Required: [ ] Yes [X] No

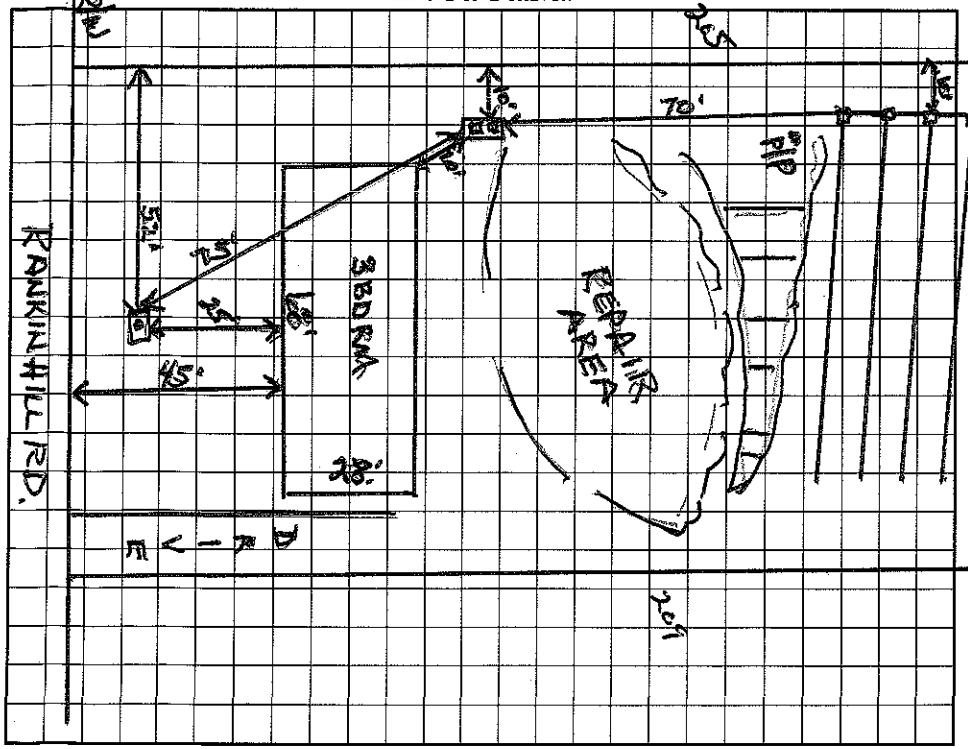
[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 3
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

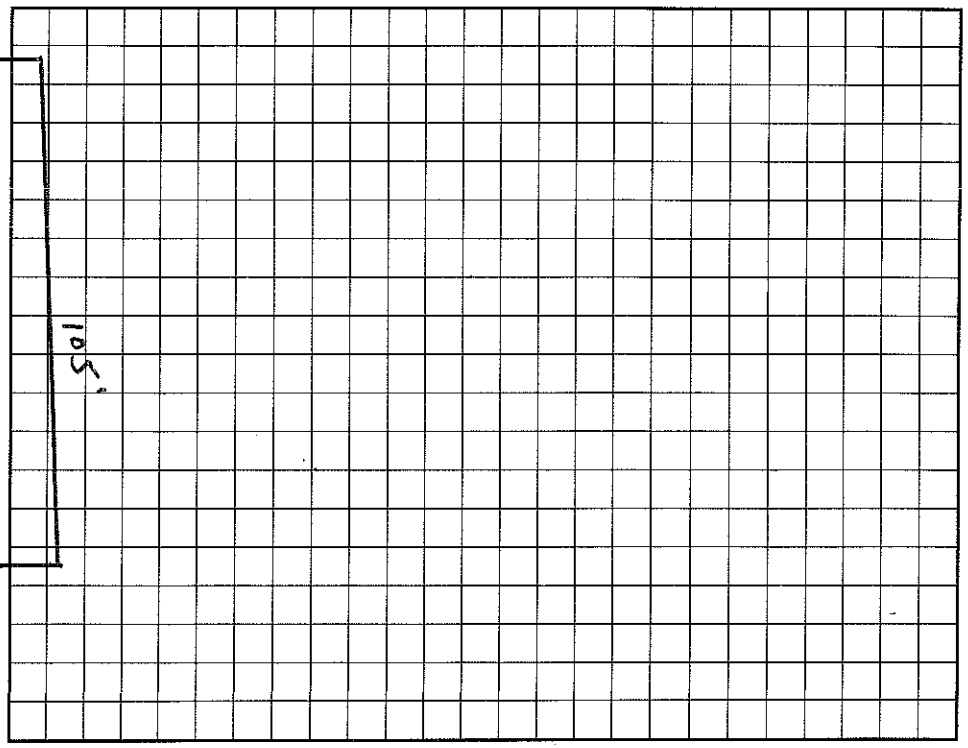
Comments:/Conditions: * 25% Reduction for use of Chamber Plastic or H.D.S. materials

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 plan 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: * [signature] date

Improvement Permit by: Wesley Sparks R.S. date 8/16/98

Authorization to Construct by: Wesley Sparks R.S. date 8/16/98

Installed by: A1 BACKHOE

Operation Permit by: [signature] date 8/13/99

Existing System Inspection by: date

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