IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072695 PIN# ~~4664 28 6284~~ 4654-88-9423 DATE 4/28/98

OWNER OR CONTRACTOR Jack Packard PHONE: Business _____ Home 542-1264

ADDRESS 3809 Carmel Forest Dr. Charlotte, NC. 28226

LOCATION Shearers Rd TR Presbyterian Tr on new road across from Gold Hill Subdivision - 5th + 6th lot on L

SUBDIVISION Davidson Ridge BLOCK / SECTION _____ LOT 5+6 LOT AREA 2 Ac SITE CLASS. PS DESIGN FLOW ~~450~~ 360 GPD L.T.A.R. 1.3

Septic Tank: 1250 Gallons; STB 799 Date 2/15/99

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200* Linear Feet 460*

No Lines 4 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: GRAV ~~CONV PLASTIC~~ *

Repair System Description: Pressure CONV. AMS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☒ Other GAR. DISPOSAL

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

Water Supply: ☑ Individual ☐ Public ☐ Community

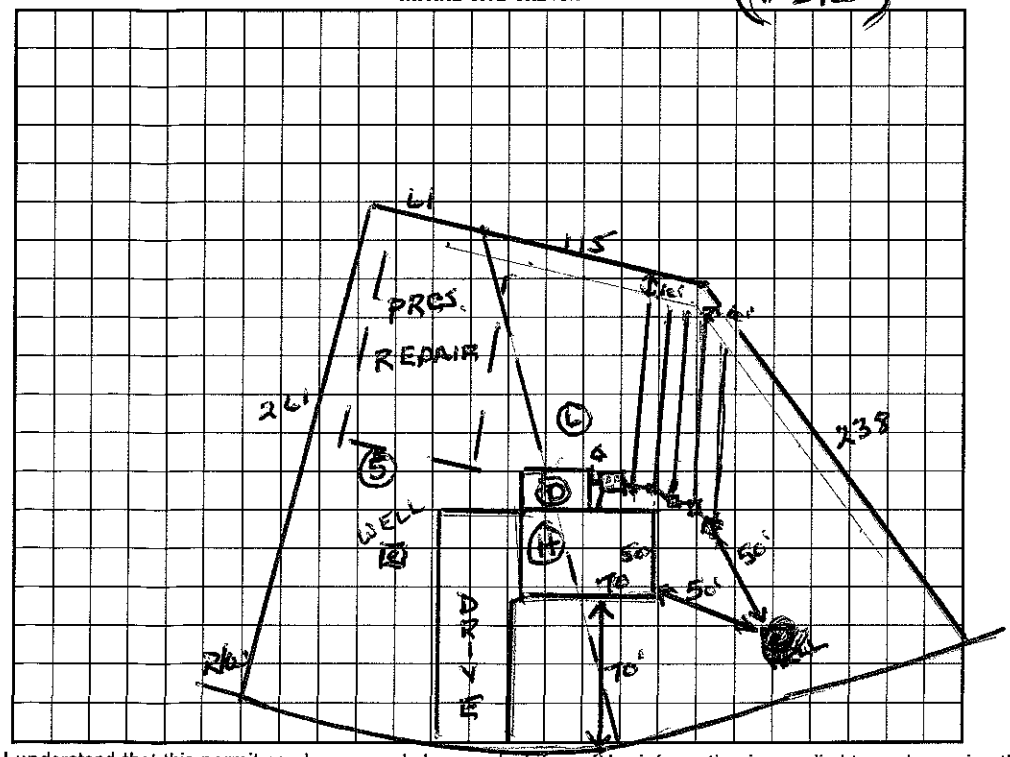
Comments:/Conditions: * System receives 25% reduction

Comments:/Conditions:

93
85
79
70

INITIAL SITE SKETCH

((1" = 100'))



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 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: * Jack C Packard DAVIDSON RIDGE CT. date 4/29/98 Installed by: Atlantic Grading Co.

Improvement Permit by: Wesley Sparks RS. date 4/28/98 Operation Permit by: Wesley Sparks RS date 11/16/99

Authorization to Construct by: Wesley Sparks RS. date 4/28/98 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