IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 104274 PIN# ~~4655-30-2527.10~~ 4655-30-1626 DATE Dec 20, 02

OWNER OR CONTRACTOR Tom Wyatt // Tommy Cowart PHONE: Business _____ Home _____

ADDRESS P.O. Box 545 RE Lane / Mt Mourne N.C. 28123

LOCATION 115 S. TL McLurkin Lake Rd. TL Monarch Lane 1st lot on Right

SUBDIVISION Davidson Creek BLOCK / SECTION 1 LOT 10 Revised LOT AREA 1.50 ac SITE CLASS. RS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1500 Gallons; STB 794 Date 5/30/04

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480

No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: Gravity 25% Reduction

Repair System Description: Gravity pumped 25-50% Reduction

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4/4 No. Bathrooms _____ No. Employees _____

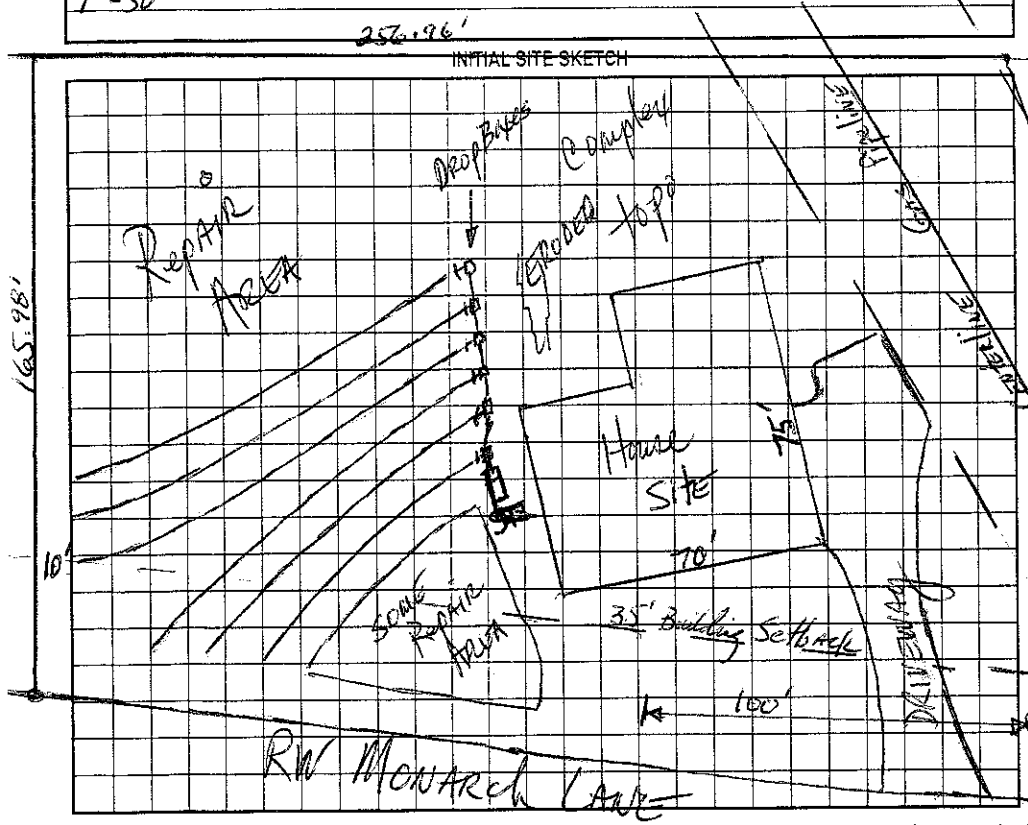
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

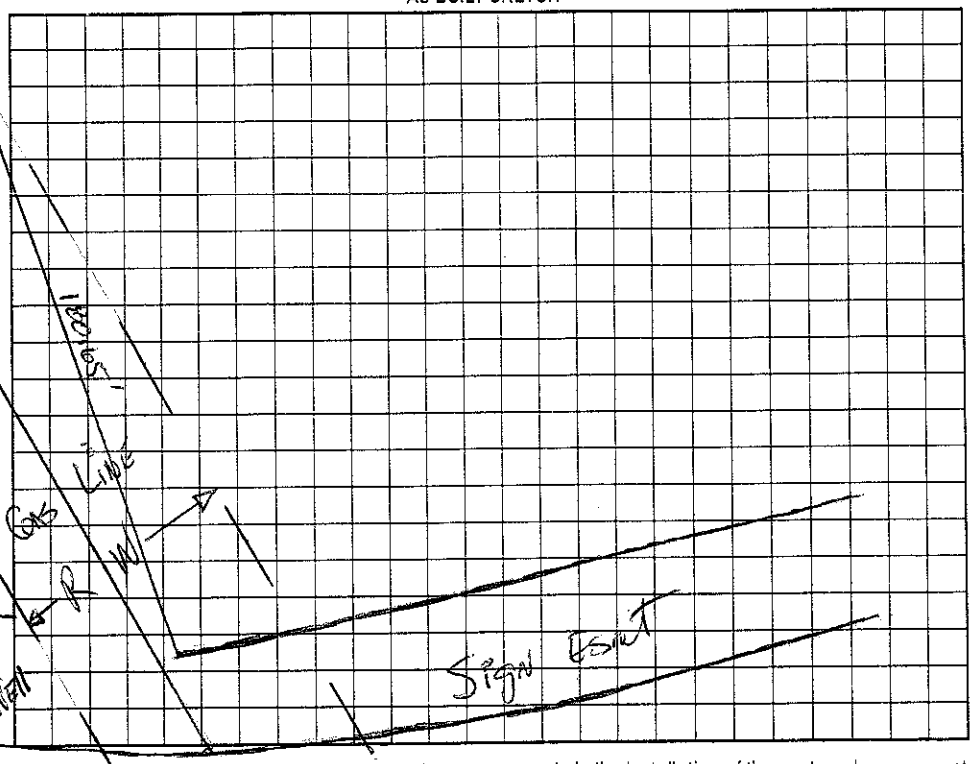
Comments/Conditions: This site is a combination of original lots 14 & 15. $350.00 has been paid to date on these combined lots. 1"=50'

Comments/Conditions: Infiltration installed

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 1-03-03 Installed by: Penn Warden

Improvement Permit by: _____ date 12-20-02 Operation Permit by: Wesley Sparks RS. date 7/2/04

Authorization to Construct by: _____ date 3-25-04 Existing System Inspection by: _____ date _____

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