Dunning 634-5823

IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 5/12/08

PERMIT# 149820 PIN# 4655815068.000

OWNER OR APPLICANT Alice McGraw or Vernon McGraw PHONE: Business 704 634-7789 Home 704 892-9172

ADDRESS 205 Tammy Dr. Mooresville NC 28115

LOCATION 11.5 S TL Faith Rd TA Midway Lake TL Tammy Dr 205 Tammy Dr.

SUBDIVISION N/A BLOCK / SECTION ____ LOT ____ LOT AREA 2.65 ± SITE CLASS. F5 DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 794 Date 1/11/08

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300'

No Lines 3@100' Trench Width 36" Max Trench Bottom Depth 28" * Gravel Depth N/A

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

System Description: Gravity - 25% Reduction

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Persons ____ No. Employees ____

Water Supply: ☑ Individual Exs. ☐ Public ☐ Community

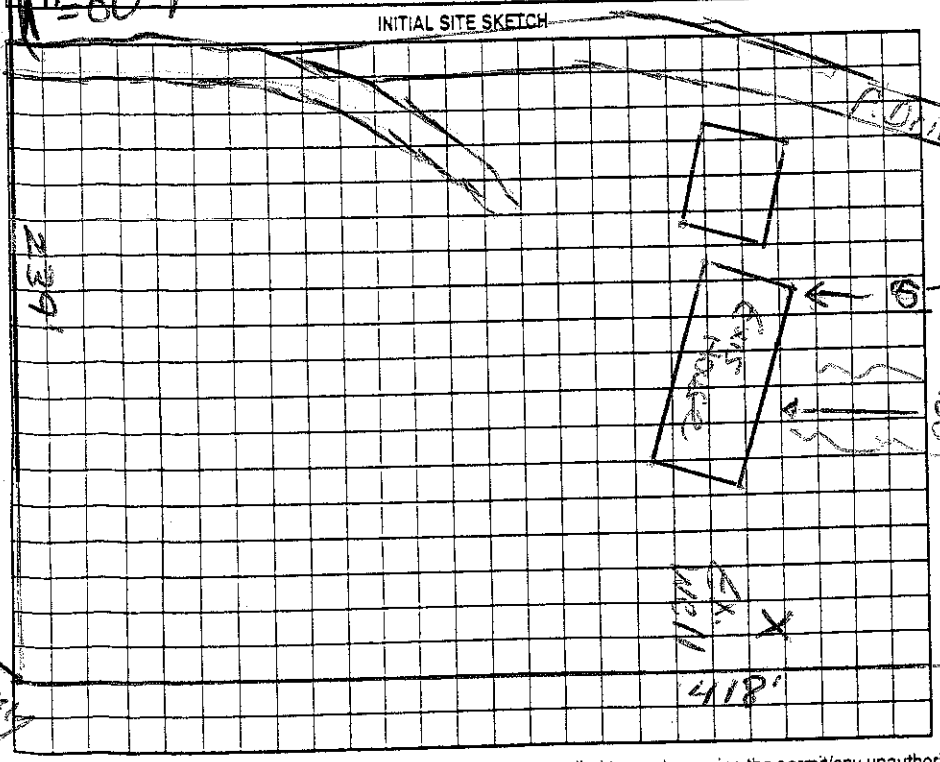
☑ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: 417'

use Drop boxes or a DB with flow levelers

(11-60')

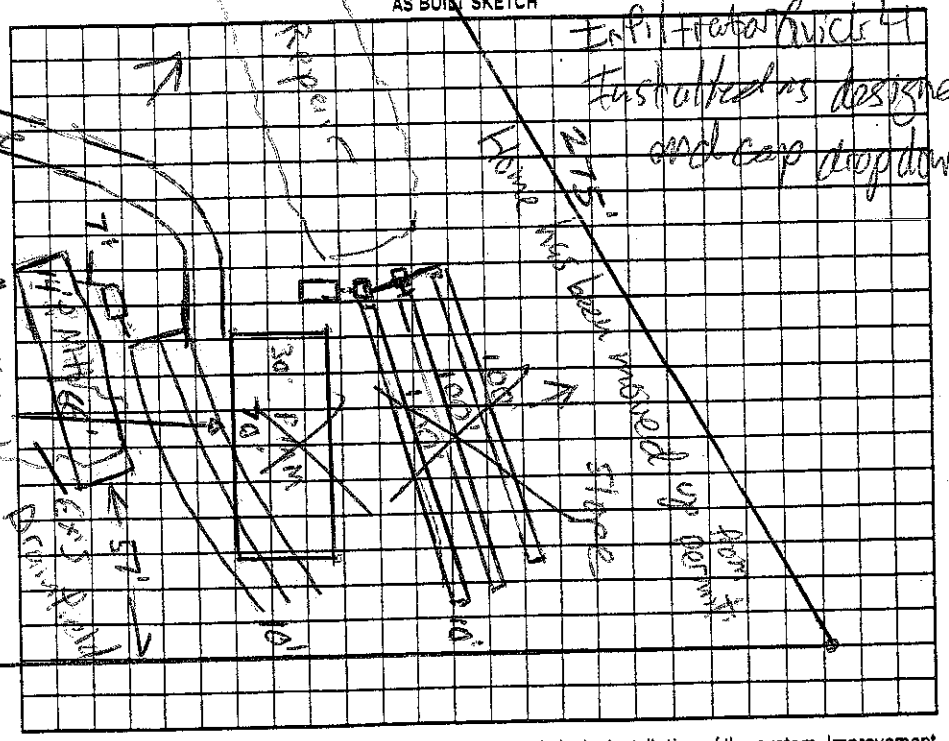
INITIAL SITE SKETCH



Comments:/Conditions:

AS BUILT SKETCH

Infiltrator Quick 4 Installed as designed and cap drop downs



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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☑

Signed: Jacob Megan date 5-13-08

Improvement Permit by: Anthony Cobert date 5/12/08

Authorization to Construct by: Anthony Cobert date 5/27/08

Installed by: Curt Dunning

Operation Permit by: Anthony Cobert date 6/6/08

Existing System Inspection by: ____ date ____

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