# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 131974 PIN# 4676812923 4676-81-1834 Lot 34

OWNER OR APPLICANT Tom Murphy PHONE: Business _____ Home _____ DATE 3/2/07

ADDRESS _____

LOCATION Linwood Rd, LT on Teeter, Rt on Walden Dr., Rt on Riverchase, at end, left of cul-de-sac

SUBDIVISION Walden Ridge BLOCK / SECTION _____ LOT 33+34 LOT AREA _____ SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .28 gpd/ft²

Septic Tank: 1000 Gallons; STB 312 Date 2-27-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 450

No Lines 6@80' Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: Gravity - 25% Reduction

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/A ☑ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

No. Bedrooms 4 No. Persons _____ No. Employees _____

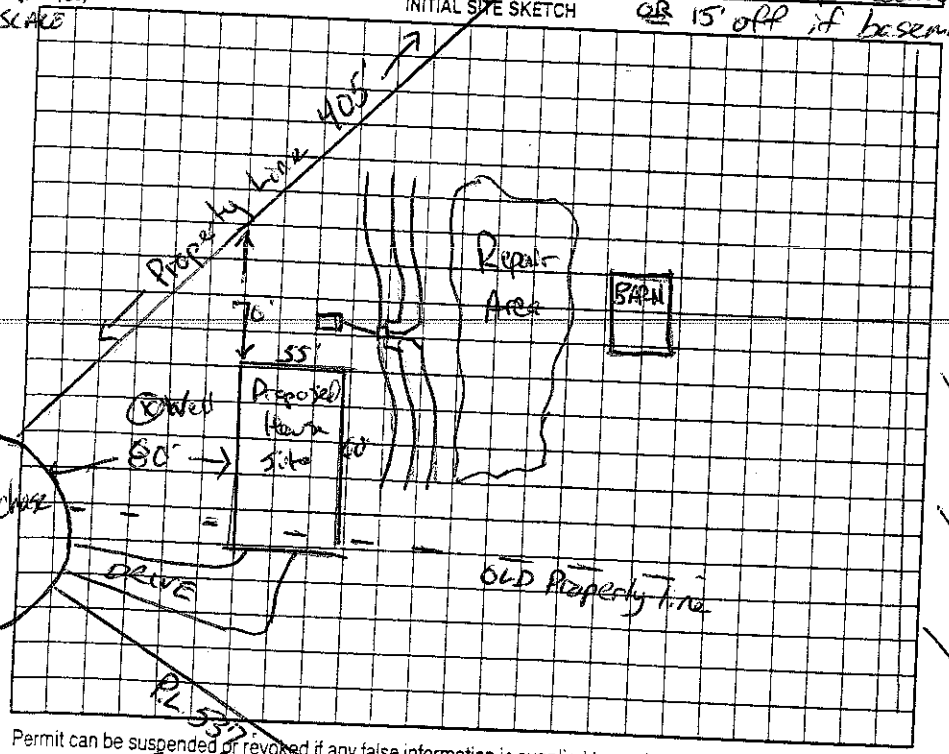
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Owner bought Lots 33+34, combined as one lot.
1) Keep lines on contour, 6 lines at 80' each centered
2) 10' off property lines 3) Tank to be 10' off foundation or 5' side well, OR 15' off if basement well

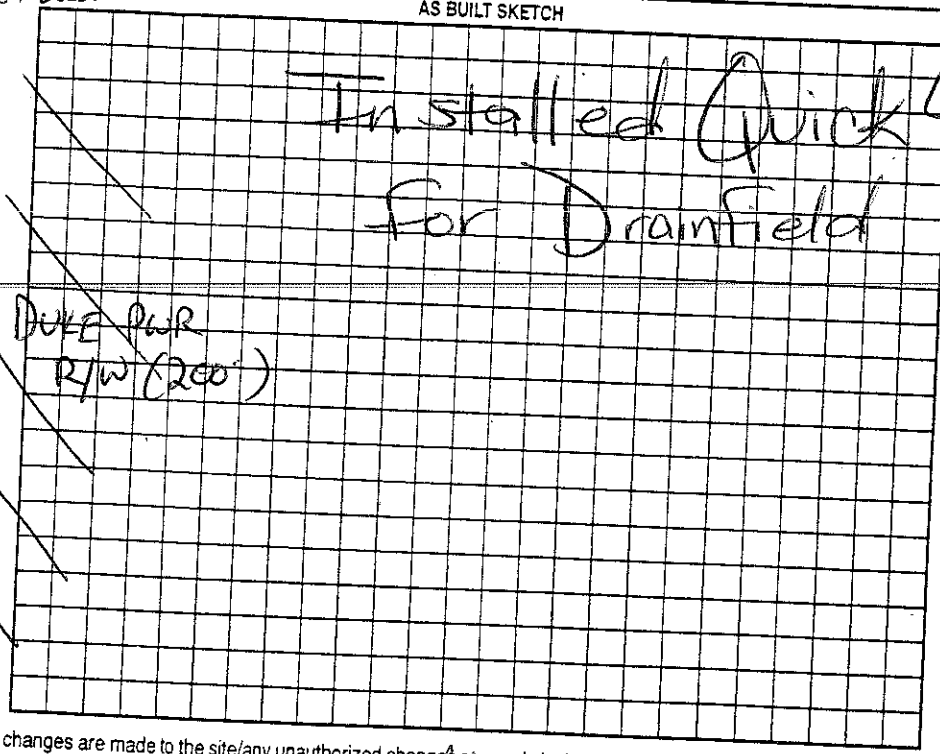
Comments:/Conditions:

KNOT DRAWN TO SCALE

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 3/2/07

Improvement Permit by: John E Ayd date 3/2/07

Authorization to Construct by: Wesley Sparks RS. date 5/8/07

Installed by: Richard Abernathy

Operation Permit by: Maria M Dotson RS date 11/8/07

Existing System Inspection by: _____ date _____

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