IREDELL COUNTY HEALTH DEP[illegible]MENT

STATESVILLE 704-878-5305 MO[illegible]SVILLE 704-664-5281

2:30-3

IMPROVEMENT PERMIT / AUTHO[illegible]TION TO CONSTRUCT / OPERATION PERMIT / EXIS[illegible]NG SYSTEM INSPECTION

PERMIT# 104721 PIN# 4685 11 2311 DATE 11/23/04

OWNER OR CONTRACTOR David Douthitt

ADDRESS 134 Langtree Rd, Mooresville, NC 28117 PHONE: Business 704-663-9059 Home

LOCATION 3 South TL Patterson Farm Rd. on (R) past Rustic Rd. 4685-11-2311

SUBDIVISION Patterson Creek BLOCK / SECTION ______ LOT Tract 6 LOT AREA 3.5 Ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 350 Date 9/21/04

Pump Tank: ______ Gallons; PT ______ Date ______

Pump Make: ______ Model ______ Serial No. ______

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100 Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth 12"

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

System Description: Gravity Conventional

Repair System Description: Same Type

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees ______

☐ Other ______

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

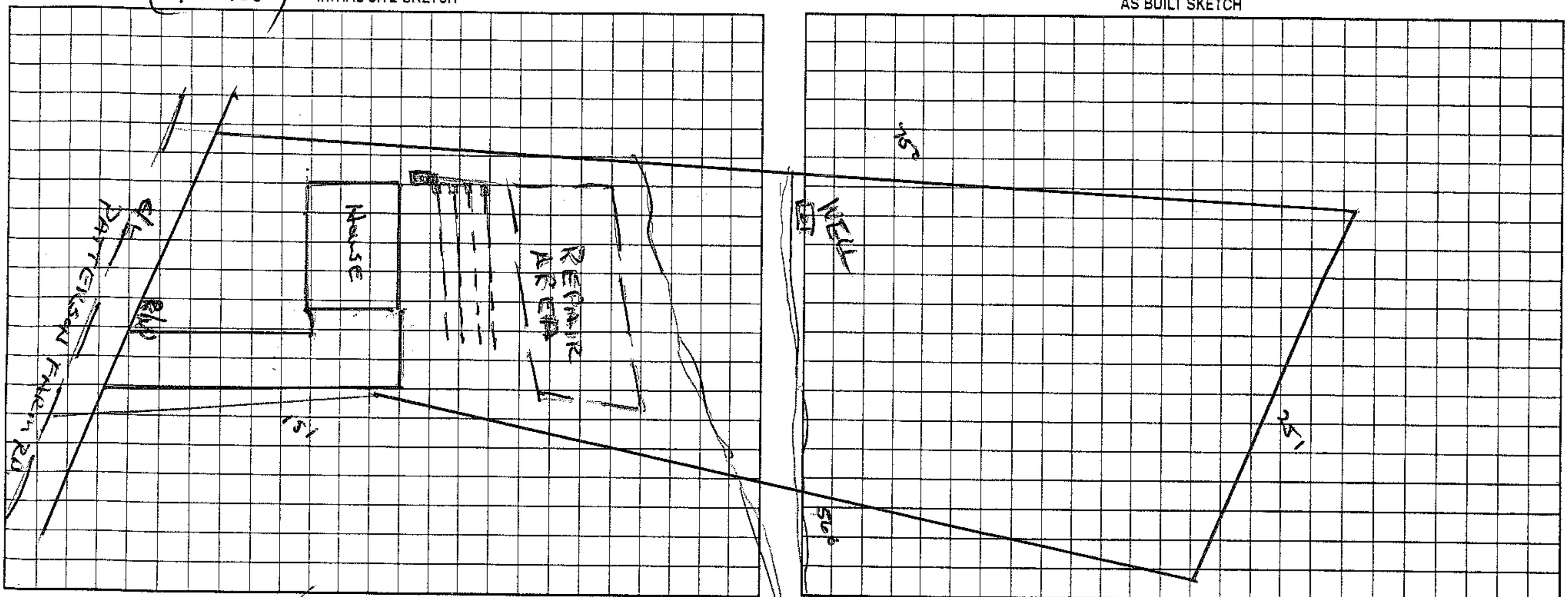
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Lines to be on contour in direction shown on permit

Comments:/Conditions:

(1" = 100') 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: X [signature] date 11/23/04 Installed by: Piedmont Septic Tank

Improvement Permit by: Wesley Sparks R.S. date 11/23/04 Operation Permit by: Wesley Sparks R.S. date 12/14/04

Authorization to Construct by: Wesley Sparks R.S. date 11/23/04 Existing System Inspection by: ______ date ______

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