This Voids Previous Permit

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 87236 PIN# 4706337693pt DATE July 14, 2000

OWNER OR CONTRACTOR David Black PHONE: Business _____ Home _____

ADDRESS 5094 Styers Ferry Rd Lewisville NC 27023

LOCATION Hwy 90 W. (L) Robertson (L) Ridge Run, Lot on Right Toward end

SUBDIVISION Ridgewest BLOCK / SECTION _____ LOT 4 LOT AREA .66 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 760 Date 4-24
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY 25% Reduction
Repair System Description: Pump Reduction
Maintenance Agreement Required: ☐ Yes ☒ No

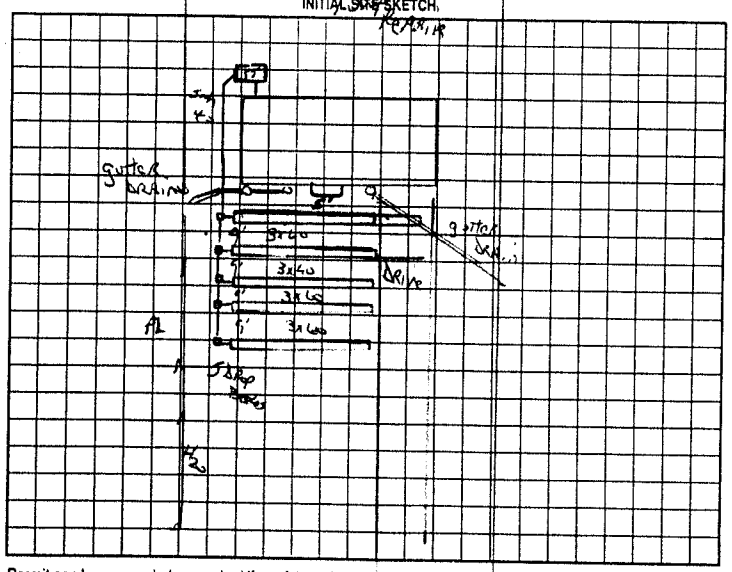
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

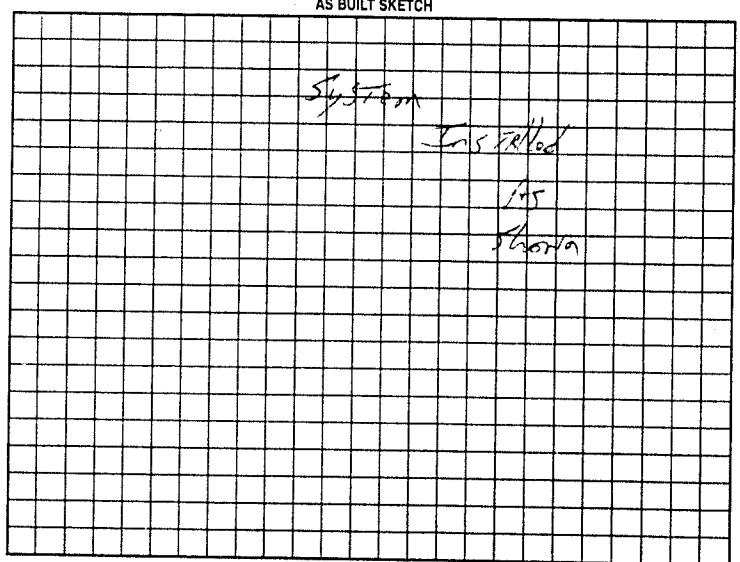
Comments/Conditions: 48 Chambers or 30 HDS Sections
My use Distribution Box w/ speed levels
All gutters MUST be diverted Away From Septic Area

Comments/Conditions: Z-Axel filter Used
Backfilled w/Type III soil

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: David Johnston date _____ Installed by: J Rod Trucking

Improvement Permit by: Jc Potter date July 14 2000 Operation Permit by: Jc Potter date July 18 2000

Authorization to Construct by: Jc Potter date July 14 2000 Existing System Inspection by: _____ date _____

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