64x66

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 110039 PIN# ~~4711068267.14~~ 4716-13-7808 DATE 3/25/03

OWNER OR CONTRACTOR BRIDGEWATER CO. LLC Lonnie Virginia Brown PHONE: Business 799-9770 Home

ADDRESS PO BOX 3608 MOORESVILLE NC 28117

LOCATION BUFFALO SHOALS TOWARD LAKE - TL WINDING WOOD - 14th ON LT

SUBDIVISION RIDGEWOOD BLOCK / SECTION LOT 14 LOT AREA 1.66AC SITE CLASS PS DESIGN FLOW 480GPD L.T.A.R. .3610/FT

Septic Tank: 1000 Gallons; STB 826 Date 10-2-05

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1605 Linear Feet 535

No Lines 5@107' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: GRAVITY CONVENTIONAL

Repair System Description: GRAV. 25% REDUCTION

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

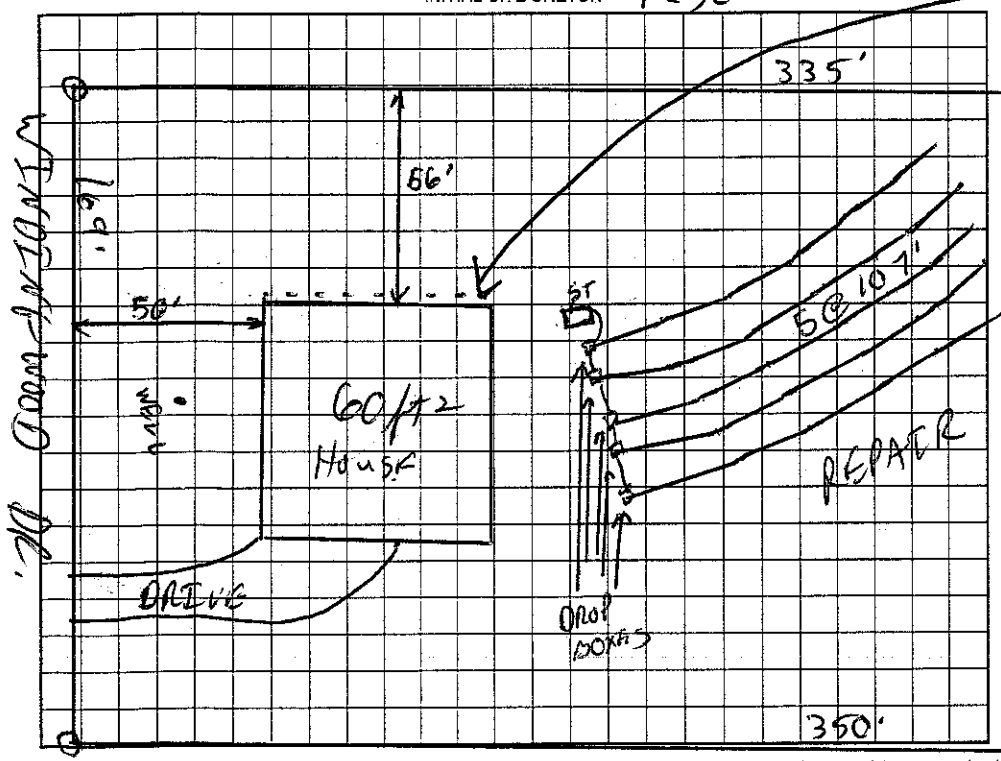
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

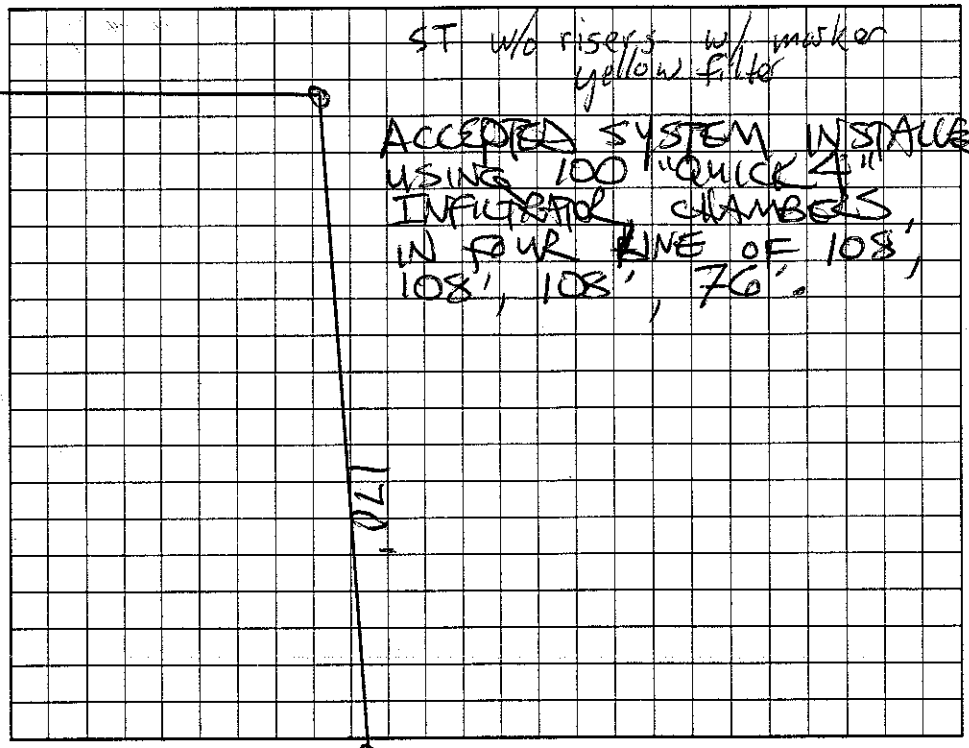
Comments:/Conditions:

Comments:/Conditions: Approved 64'x60' HOUSE PLAN THAT IS 4 BEDROOMS ON 4-19-05. SIDE SETBACK IS CHANGED TO 62' NOT 66'. FRONT IS STILL 50' OFF ROAD

INITIAL SITE SKETCH 1"=50'



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 4/7/05 Installed by: RAY'S (ROBBIE RAY)

Improvement Permit by: C. date 3/25/03 Operation Permit by: STEVE HERRICK date 12-28-05

Authorization to Construct by: x date 4/19/05 Existing System Inspection by: date

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