IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 90427 PIN# 4711 66 3180 DATE 7-20-00

OWNER OR CONTRACTOR D + D Enterprizes PHONE: Business 528 6192 Home

ADDRESS Po Box 5602 Troutman N.C.

LOCATION Buffalo Shoales TL Pineville Rd TR Braxton 2nd R lot left

SUBDIVISION Pineville Rd Est BLOCK / SECTION LOT 6 LOT AREA .69acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 135gal/35'/day

Septic Tank: 1000 Gallons; STB 1012 Date 11/22/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

☑ New System ☐ Repair System Type: I II III IV V VI
System Description: Conv. Gravity
Repair System Description: 25% Reduction
Maintenance Agreement Required: ☐ Yes ☑ No

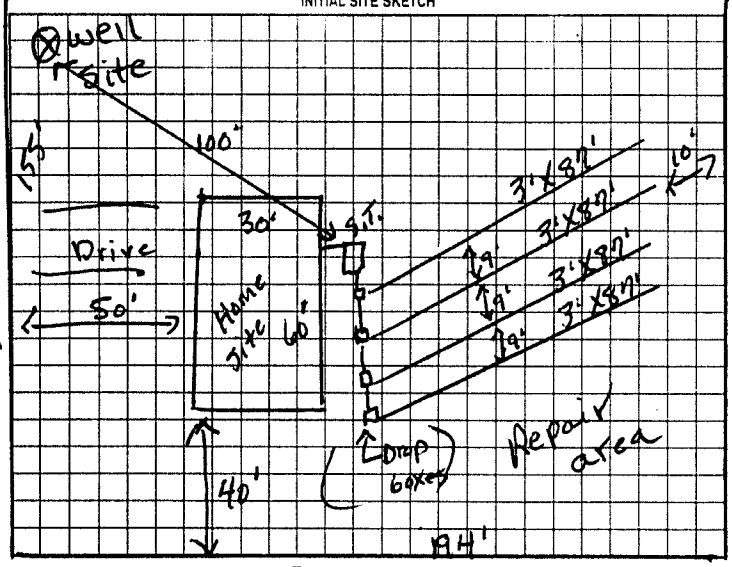
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

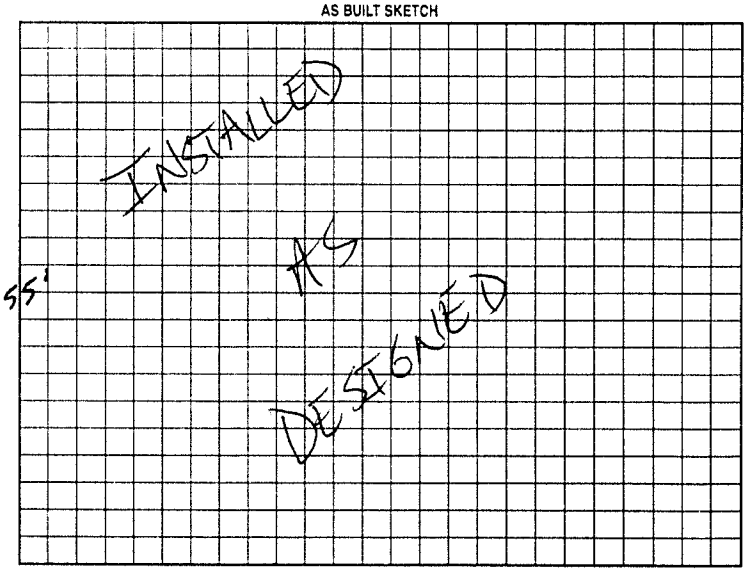
Comments/Conditions: 194'

Comments/Conditions: ① PUMP SEPTIC TANK EVERY 3-5 YRS.

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 _____ Installed by: DAVID YOUNTZ

Improvement Permit by: J. C. Moore date 7-20-00 Operation Permit by: _____ date 5/10/01

Authorization to Construct by: J. C. Moore date 7-20-00 Existing System Inspection by: _____ date _____

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