# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 116613 PIN# 4713-86-5341 DATE 10-28-03

OWNER OR CONTRACTOR VIRGIL RAY SNOAT PHONE: Business 704-202-5568 Home 704-987-0278

ADDRESS P.O BOX 3792, MOORESVILLE, NC 28117

LOCATION US 70 W, TL BETHLEHEM RD, TL GREENWICH, TL HEATHROW, TR DUBLIN COURT, AT END ON RIGHT

SUBDIVISION THE LANDINGS BLOCK / SECTION III LOT 67 LOT AREA 0.49 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 11-12-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet ~~EQ.~~ 1440 Linear Feet 240
No Lines EIGHT Trench Width 24" Max Trench Bottom Depth 36" ~~Gravel~~ Depth SAND 24"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 50% REDUCTION, GRAVITY
Repair System Description: 50% REDUCTION, LOW PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

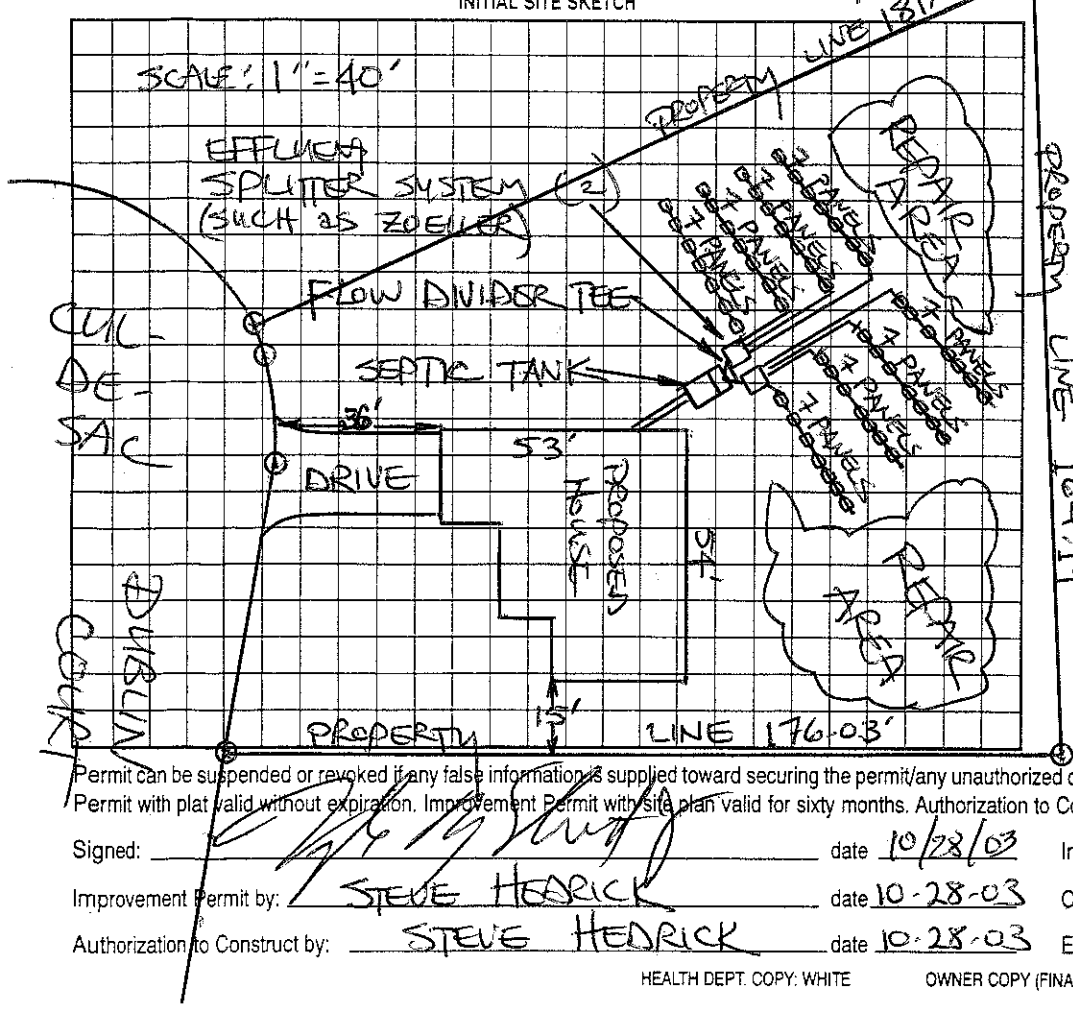
☐ Slab ☑ ~~Crawl~~ Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: INSTALL 50% REDUCTION SYSTEM IN EIGHT (8) EQUAL LENGTH LINES ON CONTOUR AS SHOWN, USING 56 PPBPS PANELS @ SEE ATTACHMENT FOR SPLITTER & DISTRIBUTION SYSTEM.

Comments:/Conditions: 2ABEC FILTER & MARKER
USED 2 DIST BOX WITH SPEED LEVELERS
NO TRI FLOW SPLITTERS AVAILABLE AT TIME OF SYSTEM CHECK.

INITIAL SITE SKETCH




AS BUILT SKETCH

INSTALLED AS DRAWN

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 10/28/03 Installed by: HOWARD BROS

Improvement Permit by: STEVE HEDRICK date 10-28-03 Operation Permit by: ____ date 3-12-04

Authorization to Construct by: STEVE HEDRICK date 10-28-03 Existing System Inspection by: ____ date ____

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