IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 094424 PIN# 4722 37 3451 DATE 2/26/01

OWNER OR CONTRACTOR TRIVESTER LLC. PHONE: Business (704) 609-7745 Home

ADDRESS P.O. BOX 115, MOORESVILLE, NC 28115

LOCATION BUFFALO SHOALS RD. (L) OLD MTN. RD. (R) ORVILLE RD. (R) WRIGHT LN.

SUBDIVISION TROUTMAN AF BLOCK / SECTION LOT 114 LOT AREA .5 SITE CLASS PS DESIGN FLOW 3X060D L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 312 Date 5-7-01
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1028 Linear Feet 345'
No Lines 3 Trench Width 3' Max Trench Bottom Depth 30" Gravel Depth 12"

☒ New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONVENTIONAL
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

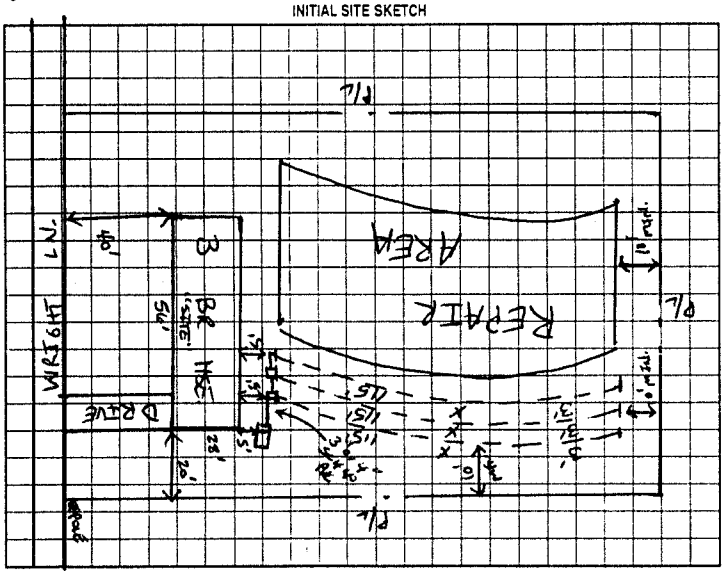
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: (1) NO CUTTING OR FILLING OVER DRAINFIELD/REPAIR AREAS (2) KEEP ALL DRAINS AWAY FROM DRAINFIELD/REPAIR AREAS (3) MAINTAIN SETBACKS (4) INSTALL DRAINLINES UNIFORM AND ON CONTOUR.

Comments/Conditions: INSTALLED AS SHOWN WITH 2 ABEC FILTER & MARKER

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: R.M. Hall date

Improvement Permit by: Swaney Shinn date 2/26/01

Authorization to Construct by: Swaney Shinn date 2/26/01

Installed by: CRAIG THOMPSON

Operation Permit by: Jim Cook REHS date 6/11/01

Existing System Inspection by: date

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