IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (a) MOORESVILLE 704-664-5281

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

$ 130

PERMIT# 119969 PIN# 4722-79-~~1840.26~~ 4344 DATE Aug 6, 04

OWNER OR CONTRACTOR Mountain Creek Invt. / Spence Blakes PHONE: Business _____ Home _____

ADDRESS 125 Whaling Dr. Mooresville, N.C. 28117

LOCATION From Troutman Old Mtn Rd. TR Buffalo Shoals TR Davidson Rd. TR Winding Cedar TL ~~Whistling~~ Shoal Pines on left

SUBDIVISION Davidson Woods BLOCK / SECTION II LOT 26 LOT AREA .54/Ac SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 7-21-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity 25% Reduction
Repair System Description: GRW/pumped 25-50% Red.
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

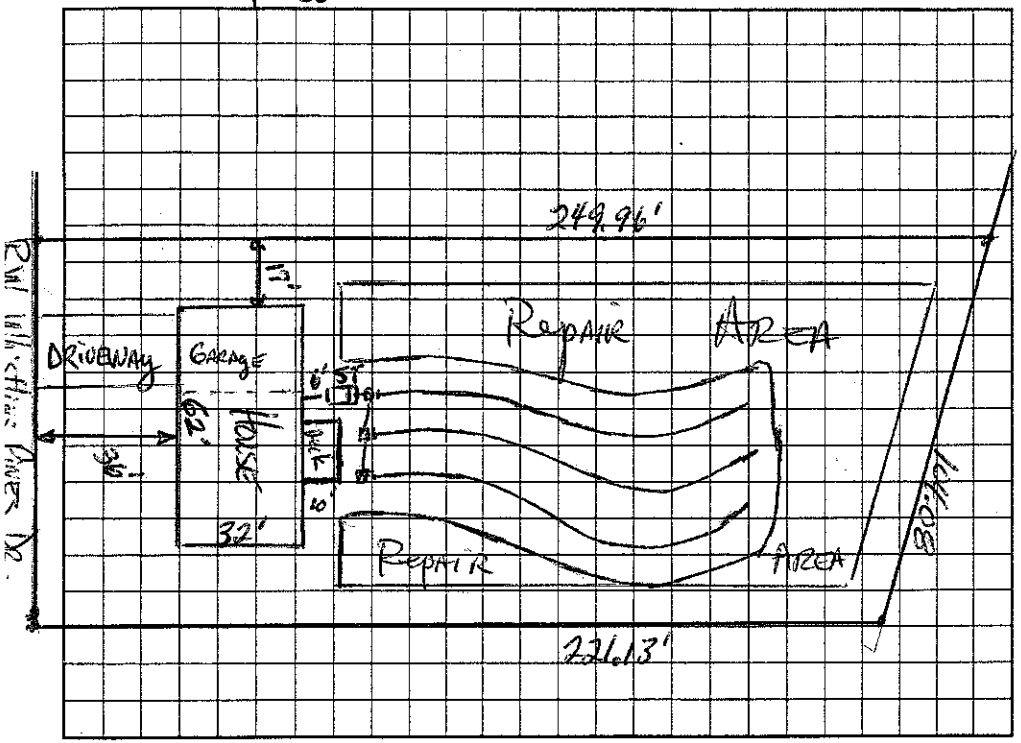
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions:

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "POLYLOK" RISER

1" = 50'

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL SITE 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: Stanley Blakes date 8-6-04 Installed by: ROWAN Septic

Improvement Permit by: RS date 8-6-04 Operation Permit by: STEVE HEDRICK date 10-4-04

Authorization to Construct by: RS date 8-6-04 Existing System Inspection by: _____ date _____

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