IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 111575 PIN# ~~4723-70-4165.9~~ 4723-709533 DATE August 18, 03

OWNER OR CONTRACTOR Mountain Creek Inv. // Speer Builders PHONE: Business _____ Home _____

ADDRESS 117 Whirling Dr., Mooresville, N.C. 28117

LOCATION From Troutman Old Mtn. Rd. TR Buffalo Shoals TR Davidson Rd. TR Winding Cedar 2nd lot on left

SUBDIVISION Davidson Woods BLOCK / SECTION 1 LOT 9 LOT AREA .46ac SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .025

Septic Tank: 1000 Gallons; STB 825 Date 30 DAYS
Pump Tank: 1000 Gallons; PT 302 Date 8-1-03
Pump Make: Zoller Model N-137 Serial No. —
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: pm - 25% Reduction
Repair System Description: LPPBRS
Maintenance Agreement Required: ☐ Yes ☑ No initially

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

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

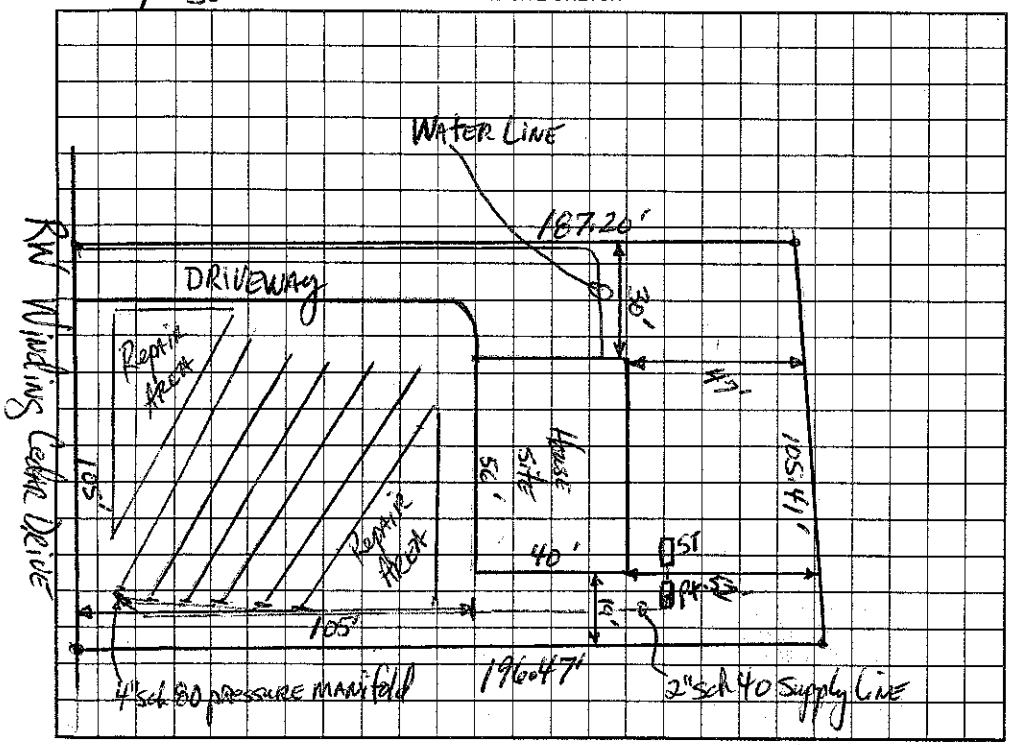
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments:/Conditions:
½" taps on p. manifold - Pump requirements 43gpm @ approx 24 TDH

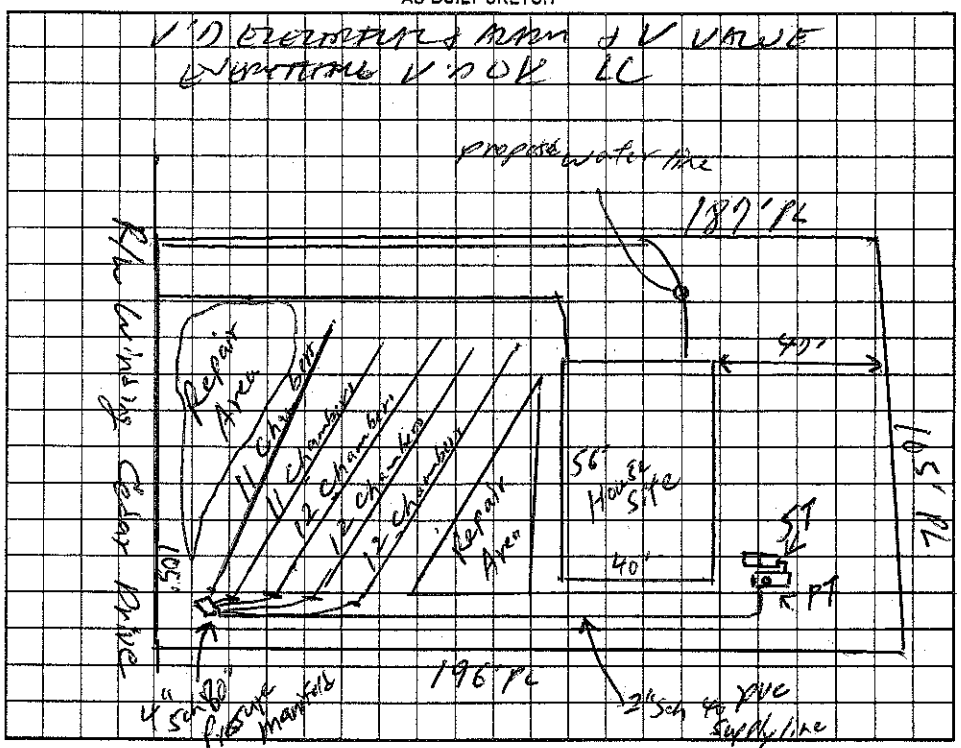
Comments:/Conditions: No date on SI. 11/10/03; LET SET 30 DAYS
- PolyLok Sitter Installed, liner okay, pressure check okay
- 11, 11, 12, 12+12 Chambers/liner = 58 chambers total
11/10/03-WJ

1"=50'

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 9/2/03 Installed by: Rowan Septic (11/10/03)

Improvement Permit by: D. Hamrick, RS date 8-18-03 Operation Permit by: _____ date 12-16-03

Authorization to Construct by: D. Hamrick, RS date 9-1-03 Existing System Inspection by: _____ date _____

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