IREDELL COUNTY HEALTH DEPARTMENT - *ENVIRONMENTAL HEALTH* ☒ STATESVILLE OFFICE 704-878-5305 ☐ MOORESVILLE OFFICE 704-664-5281

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

PERMIT # 164372 PIN # 4723709533 DATE 1-7-10

OWNER Lyle Moore APPLICANT: n/a PHONE: Home/Cell # 704 528 5620 Business #

SITE ADDRESS 111 Winding Cedar OWNER/APPLICANT ADDRESS Same

SITE DIRECTIONS Old Mountain Rd. (R) Buffalo Shoals Rd. (R) Davidson, (R) Winding Cedar

SUBDIVISION Davidson Woods BLOCK / SECTION LOT # 9 LOT AREA .46 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank EX Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

No. Nitrification Fields: EX No. Lines EX Linear Feet EX

Trench Width EX Max. Trench Bottom Depth EX

☐ New System ☐ Repair ☐ Expansion System Type I II (III) IV V VI

System Description: Existing

Repair System Description: Existing

Maintenance Agreement Required ☐ YES ☒ NO

Gravel Depth EX ☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 3

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☒ Crawl Space

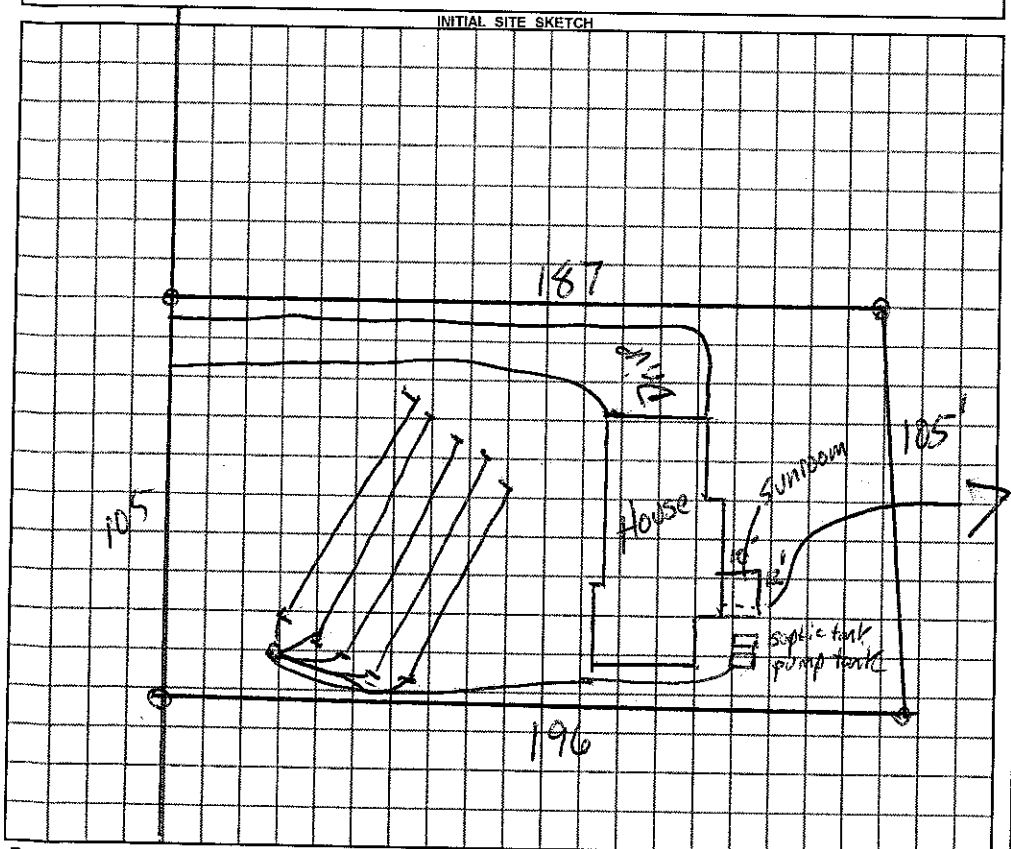
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☒ Public ☐ Community

Comments / Conditions

Cut existing slab to maintain min' 5' setback from any part of septic tank. Posts for new sunroom to be ≥ 5' from tank as well

INITIAL SITE SKETCH



AS BUILT SKETCH

Remove part of slab for 5' setback to edge of septic tank

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 plat valid without expiration.* ☐ ***AUTHORIZATION TO CONSTRUCT*** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Lyle A Moore Date 1-7-11 Installed by:

IMPROVEMENT PERMIT by: REHS Date

AUTHORIZATION TO CONSTRUCT by: REHS Date

OPERATION PERMIT by: REHS Date

Existing System Inspected by: REHS Date 1-7-10

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

White Copy -- Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant