IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 114685 PIN# 4730059320 DATE 9-5-06

OWNER OR APPLICANT TOUCHSTONE DEVELOPMENT PHONE: Business 704-201-9885 Home 704-528-9120

ADDRESS 105 Wildwood Cove Dr MOORESVILLE, NC 28117

LOCATION 21S (R) PERTH (R) STATE PARK (R) Hicks Creek (L) LEATH 2ND LOT ON LEFT

SUBDIVISION SARAH'S CREEK BLOCK / SECTION ____ LOT 9 LOT AREA 1.67 SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 11-20-06
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet ED=1600 Linear Feet 400'
No Lines 3X133' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 60% 25% REDUCTION
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Persons 8 No. Employees ____

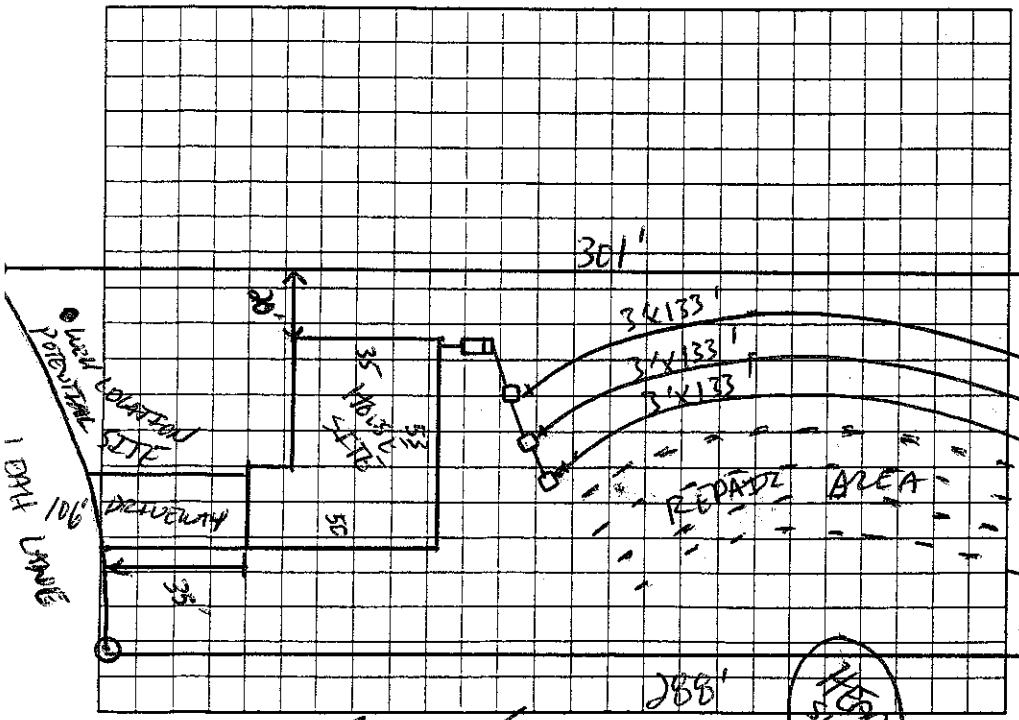
Water Supply: ☒ Individual ☐ Public ☐ Community

☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

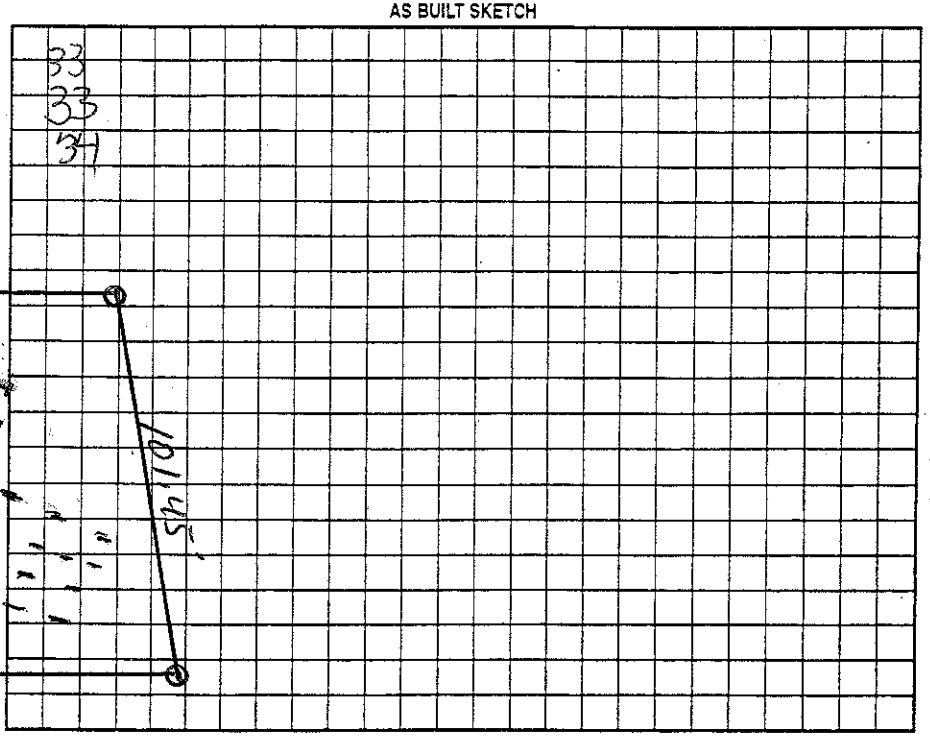
Comments/Conditions: (1) THIS IS A LIMITED REDRAW, PREVIOUS SOIL WORK & WELL LOCATION PERFORMED BY DAVID HINSON, P.S. (2) GRADE OUT OLD FIELD SMOOTHLY & UNIFORMLY AS DRAWN. DD

Comments/Conditions: NOT FILL, INSTALL LINES ON CONTOURS MAINTAIN SETBACKS,

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing this 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 9-6-06 Installed by: Rowan Septic

Improvement Permit by: ____ date 9-5-06 Operation Permit by: ____ date 2-19-07

Authorization to Construct by: ____ date 5-5-06 Existing System Inspection by: ____ date ____

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