IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 132658 PIN# 4730 36 6821 DATE 12/29/05

OWNER OR APPLICANT RYAN - WEST DEVELOPERS LLC PHONE: Business 704 799 8641 Home

ADDRESS 127 B PROMENADE DR MOORESVILLE, NC 28117

LOCATION 215 R PERTH RD R STATE PARK RD L RUSHING WATER LN L LOT 107 RUSHING WATER LN

SUBDIVISION TWIN CREEK STATES BLOCK / SECTION 1 LOT 1 LOT AREA 1.31 ACRES SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 04/06/06
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet EQ 1600 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth NA ☐ Gravity ☐ Pressure

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

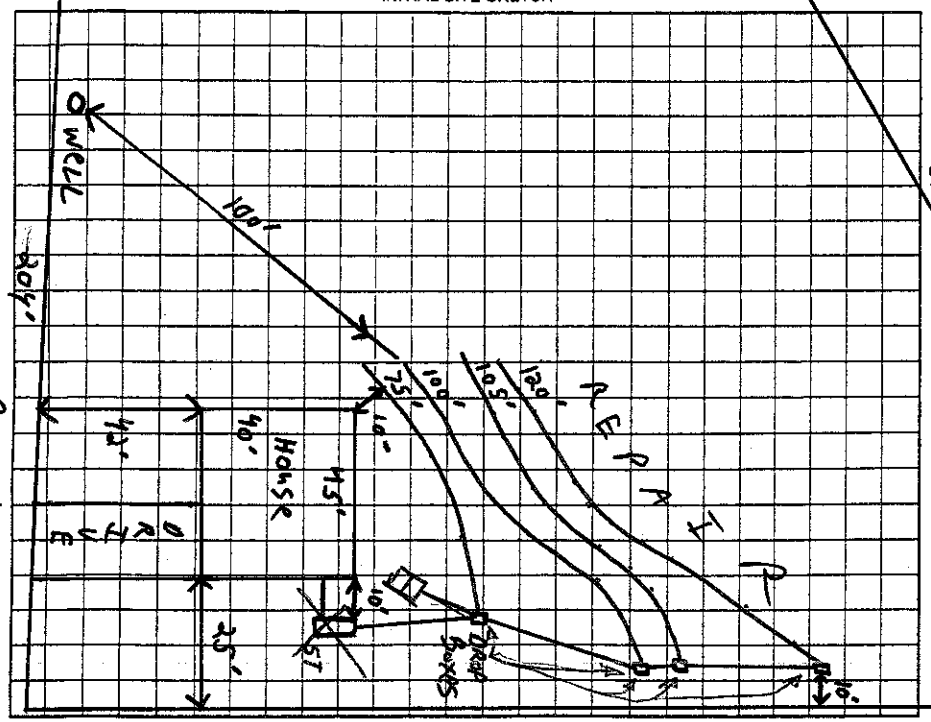
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other ____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments/Conditions:
INSTALL ON CONTOUR
MAINTAIN SETBACKS
SCALE: 1" = 50'

INITIAL SITE SKETCH



Comments/Conditions:
- USED DOWCO FILTER.

AS BUILT SKETCH

INSTALLED AS SHOWN IN INITIAL 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 1/4/06 Installed by: Wayne Clarke

Improvement Permit by: _____ date 12/29/05 Operation Permit by: _____ date 06/16/06

Authorization to Construct by: _____ date 12/29/05 Existing System Inspection by: _____ date _____

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