(Curt Dunning) 1:00 -

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4730-50-9201 DATE 9-1-04

OWNER OR CONTRACTOR FRED & SUSAN TIPPETT PHONE: Business 704-872-1321 Home 704-528-6110

ADDRESS 136 WINDING SHORE ROAD, TROUTMAN, NC 28166

LOCATION PERTH ROAD TO NEILL FARM RD, TR WINDING SHORE ROAD, 0.2 MILE ON LEFT AT #136

SUBDIVISION DUKE BLOCK / SECTION 16 LOT 153 LOT AREA 0.68 ACRE SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: EXISTING Gallons; STB ____ Date ____
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 375 Linear Feet 125
No Lines ONE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 24"

☐ New System ☑ Repair System Type: I (II) III, IV, V, VI
System Description: ____
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

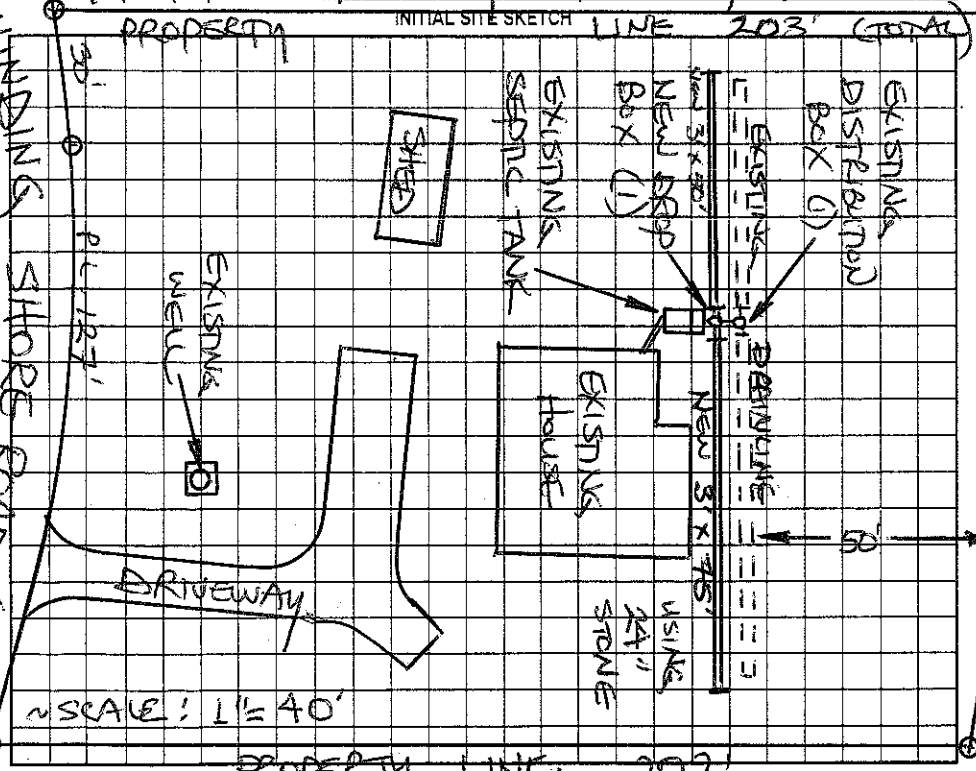
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

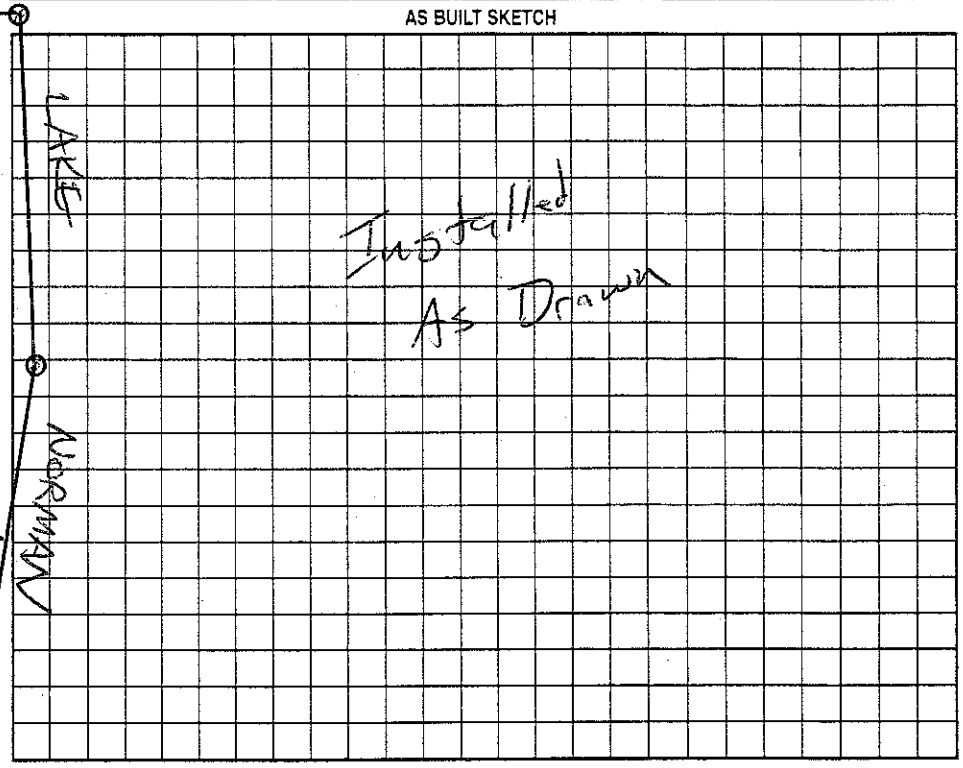
Comments:/Conditions: ① INSTALL NEW DROP BOX AT LOCATION SHOWN FEEDING NEW DRAINLINE FIRST. ② INSTALL NEW 3'x125' DRAINLINE AS SHOWN 5' OFF HOUSE, USING 24" STONE. ③ SYSTEM TO BE REPAIRED BY OCTOBER 1, 2004

Comments:/Conditions:

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: Susan W. Tippett date 9-1-04

Improvement Permit by: STEVE HEDRICK date 9-1-04

Authorization to Construct by: STEVE HEDRICK date 9-1-04

Installed by: Curt Dunning

Operation Permit by: [signature] date 9/21/04

Existing System Inspection by: ____ date ____

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