IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 140332 PIN# 4730541640 DATE 3-12-07

OWNER OR APPLICANT S&L Homes PHONE: Business 704-662-8487 Home 704-799-8641

ADDRESS 110 Charleston Dr Suite 108 Mooresville, NC 28117

LOCATION North on Twin Creeks Dr, Winding Creek Dr, Blue Stone Dr at end in cul-de-sac

SUBDIVISION Twin Creeks BLOCK / SECTION II LOT 41 LOT AREA 1.01 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 8-9-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EP=1806 Linear Feet 425'

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: GRAVITY 35%

Repair System Description: LP 50%

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons 8

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☒ Public ☐ Community

Gravel Depth N/A ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: (1) INSTALL 425' OF 35% REDUCTION

Comments/Conditions: BOWLD Filter & Risers

INITIAL SITE SKETCH

SEE ATTACHED SYSTEM DESIGN BY ROLLINS SOIL & ENVIRONMENTAL

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: Mark S. Lay date 3-12-07

Improvement Permit by: _____ date 3-12-07

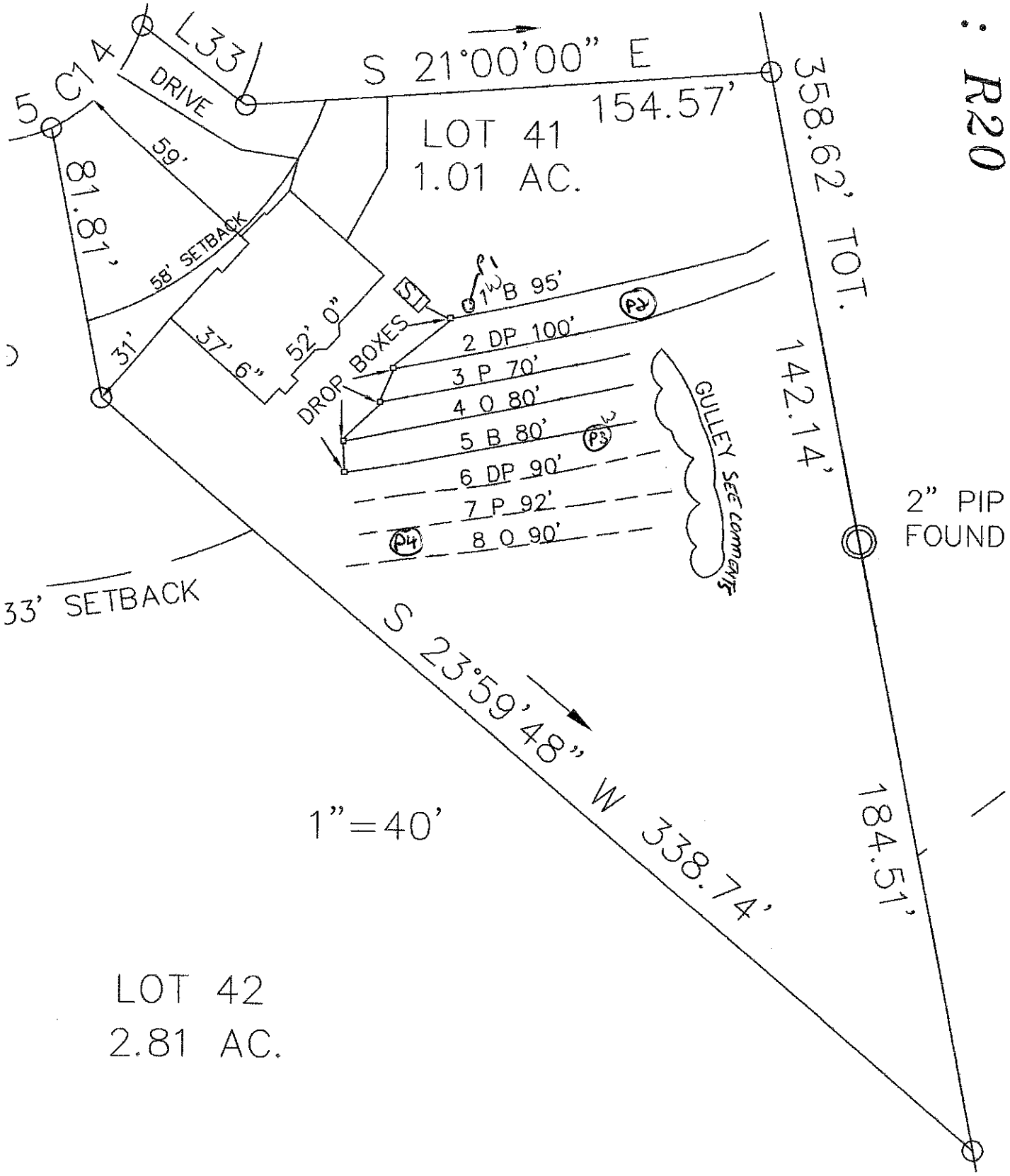
Authorization to Construct by: _____ date 3-13-07

Installed by: WAYNE CLUTZ

Operation Permit by: _____ date 10-17-07

Existing System Inspection by: _____ date _____

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


R20
S 21°00'00" E
154.57'
358.62' TOT.
142.14'
184.51'
S 23°59'48" W 338.74'
L33
DRIVE
C14
5
81.81'
59'
58' SETBACK
31'
37' 6"
52' 0"
LOT 41
1.01 AC.
DROP BOXES
S1
1W B 95'
2 DP 100'
3 P 70'
4 O 80'
5 B 80'
6 DP 90'
7 P 92'
8 O 90'
P2
P3
P4
GULLEY SEE COMMENTS
2" PIP FOUND
33' SETBACK
1"=40'
LOT 42
2.81 AC.