IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 144280 PIN# 4730550 ~~836~~ 906 DATE 8-23-07

OWNER OR APPLICANT RYON WEST DOORS LLC PHONE: Business 704-621-3012 Home 704-361-1085 Wyatt Clark

ADDRESS 215 Crystal Circle Mooresville NC 28115

LOCATION ~~Stk Park~~ RD (1) Twin Creek (2) Winding Creek on LEFT Corner of Rocky Stream Drive

SUBDIVISION Twin Creek BLOCK / SECTION 2 LOT 30 LOT AREA 1.15 LT OFFSITE SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1000 Date 12-11-06
Pump Tank: 1000 Gallons: PT 314 Date 10-7-07
Pump Make: Zoeller Model M-152 Serial No. ——
Nitrification Field: No Fields 1 Square Feet 576=1600 Linear Feet 400'
No Lines 4x100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A ☐ Gravity ☐ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: PUMP 25% REDUCTION
Repair System Description: LP 50% REDUCTION
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

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

Comments:/Conditions: (1) System Is OFFSITE & Supply Line Installed B4 Permit was Issued, See plat in Files (2) Install lines on Contours & MAINTAIN SETBACKS (3) Call Prior To Installation For

Comments:/Conditions: Pump Sizing & System Specs IF NECESSARY. BOWCO Filter & RISERS

INITIAL SITE SKETCH

SEE ATTACHED SYSTEM DESIGN BY LOWE COOK, P.S.

AS BUILT SKETCH

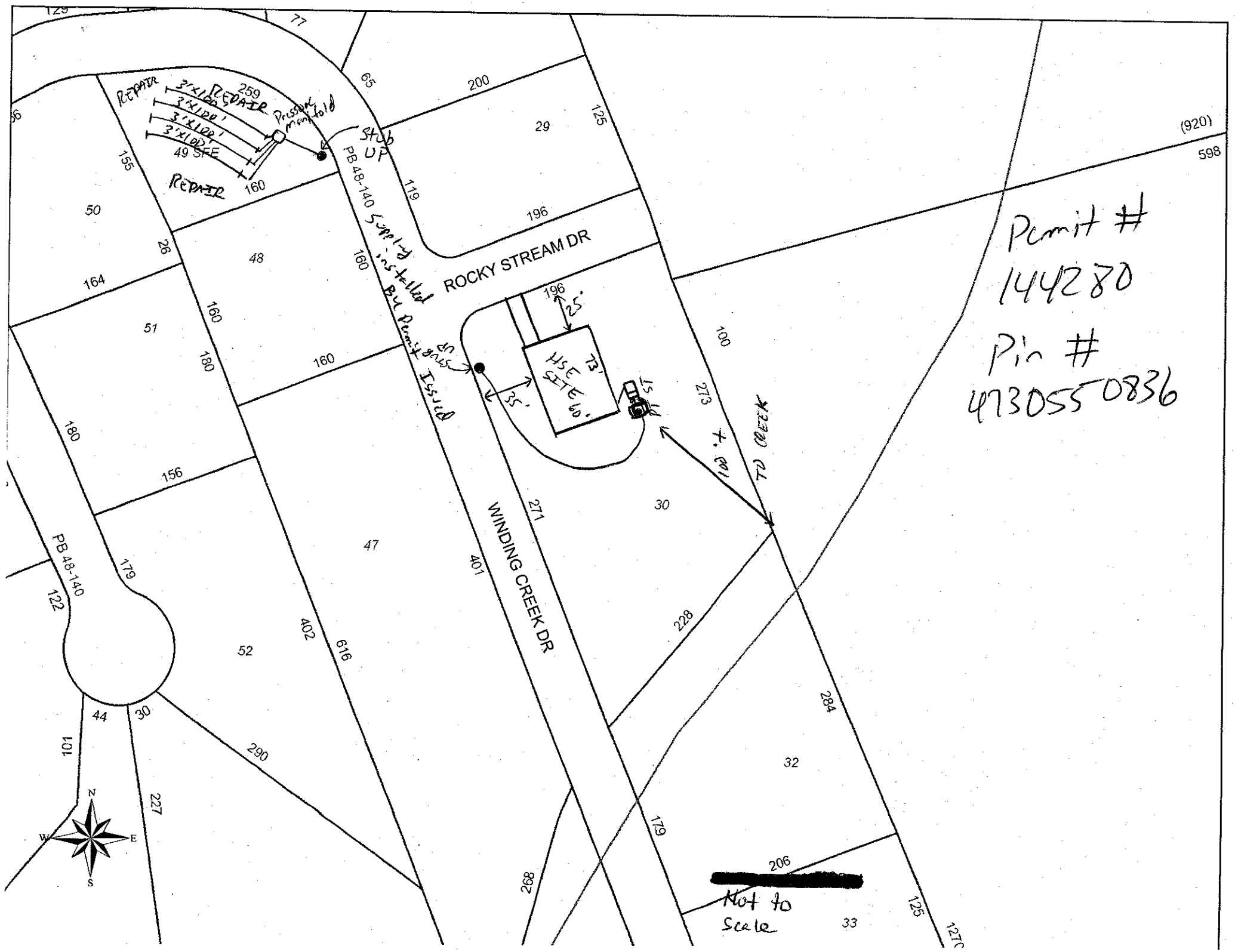
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☒ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 8/27/07 Installed by: JAMIE'S GRADING SERVICE

Improvement Permit by: [signature] date 8-23-07 Operation Permit by: [signature] date 4-18-08

Authorization to Construct by: [signature] date 8-23-07 Existing System Inspection by: ____ date ____

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


REPAIR
3'x100'
3'x100'
3'x100'
3'x100'
49 SFE
REPAIR
REPAIR
Pressure manifold
Stub UP
PB 48-140
Supply installed By Permit Issued
ROCKY STREAM DR
WINDING CREEK DR
PB 48-140
259
77
65
200
29
125
(920)
598
155
160
50
26
48
160
164
51
160
180
160
180
156
47
179
401
271
30
273
100
196
25'
73'
USE SITE 60'
15'
35'
50'
X. Pt
TO CREEK
122
52
402
616
228
284
44
30
101
290
227
32
179
206
268
125
33
Not to Scale
N
W
E
S
Permit #
144280
Pin #
4730550836