90439

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Redraw MOORESVILLE 704-664-5281

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

PERMIT# -2. TROUTMAN PIN# 3H-C-3 TROUTMAN DATE 5/15/00

OWNER OR CONTRACTOR ~~LARRY DAVIS~~ / QUICKEL DEV. CO. PHONE: Business ______ Home ______

ADDRESS 450 OAKTREE RD MOORESVILLE NC 28117

LOCATION 21/155 - TR PERTH - TL SPICEWOOD - TR SPICEWOOD - ON RT

SUBDIVISION SPICEWOOD BLOCK / SECTION 1 LOT 10 LOT AREA .673AC SITE CLASS PS DESIGN FLOW 360 gpd L.T.A.R. ~.27 gal/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 8-26-00
Pump Tank: ______ Gallons; PT ______ Date ______
Pump Make: ______ Model ______ Serial No. ______
Nitrification Field: No Fields 1 Square Feet 960 Linear Feet 320
No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

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

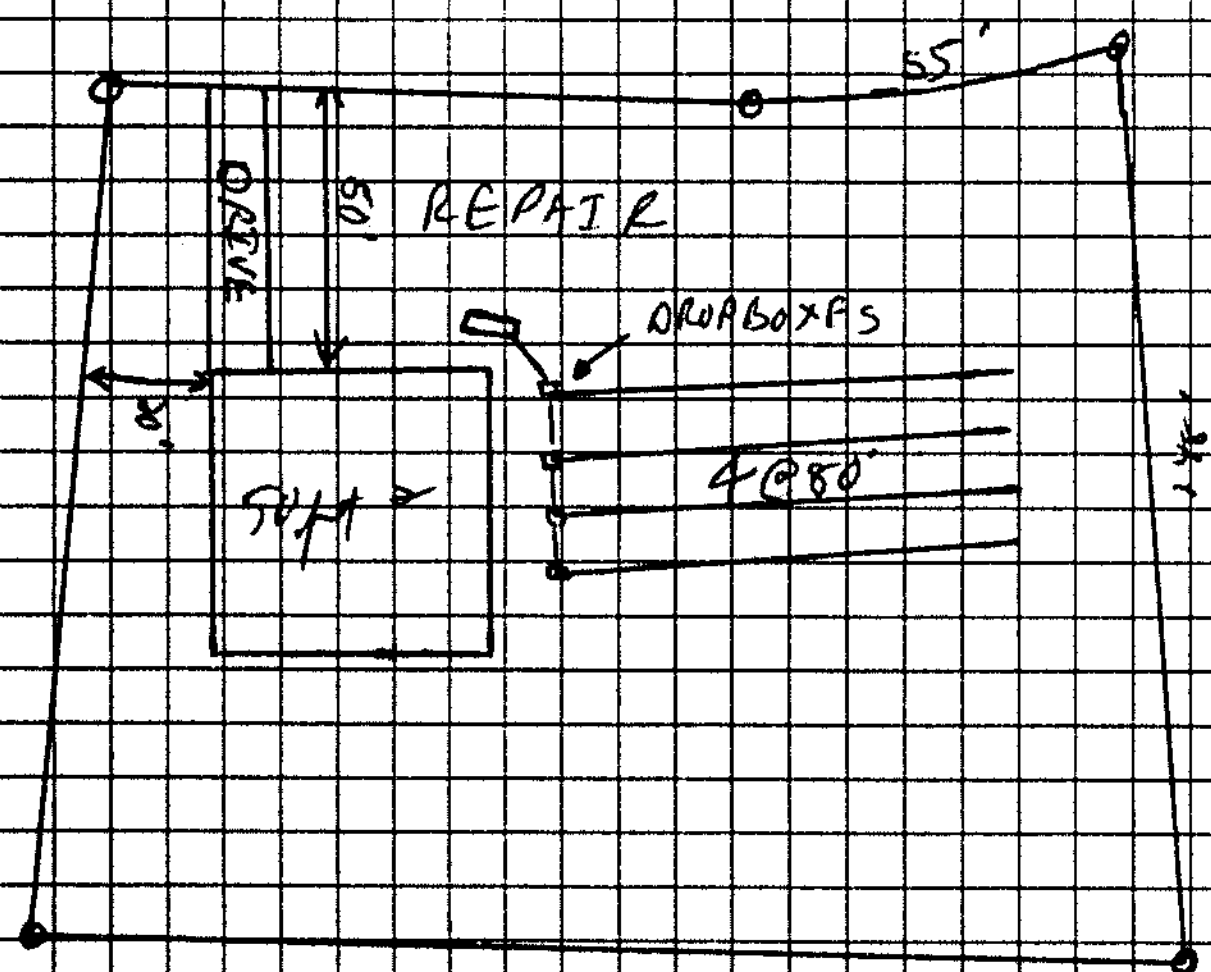
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ______
☐ Other ______
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☒ Public
☐ Community

Comments:/Conditions:

Comments:/Conditions:
Polock Filter Installed
Infiltrator Installed

INITIAL SITE SKETCH 1" = 50'



AS BUILT SKETCH

Installed as drawn.

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: Larry Davis date 5/15/00
Installed by: Richard Abernathy
Improvement Permit by: [signature] HS date 5/15/00
Operation Permit by: [signature] RSI date 11/3/00
Authorization to Construct by: [signature] HS date 5/15/00
Existing System Inspection by: William [signature] date 11/3/00 RSI

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