THIS PERMIT VOIDS PREVIOUS ISSUED 11-4-99

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# TRUITMAN (103697) PIN# 3H-C-3 4730-77-6727 DATE 1-18-02

OWNER OR CONTRACTOR QUICKEL DEVELOPMENT PHONE: Business (704) 795-0595 Home

ADDRESS P.O. Box 1218, CONCORD, NC 28026

LOCATION US 21 S, TR PERTH ROAD, TL SPICEWOOD CIRCLE, LOT INSIDE CIRCLE ON BACK AT #23

SUBDIVISION SPICEWOOD BLOCK / SECTION ____ LOT 23 LOT AREA 0.724 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GAD/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 12-30-01

Pump Tank: ____ Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No ____

Nitrification Field: No Fields 1 Square Feet 150 TO 1200 Linear Feet 200

No Lines FOUR Trench Width 24" Max Trench Bottom Depth 36'

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: 50% REDUCTION, GRAVITY

Repair System Description: 50% REDUCTION, PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

~~Gravel~~ Depth SAND 6" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

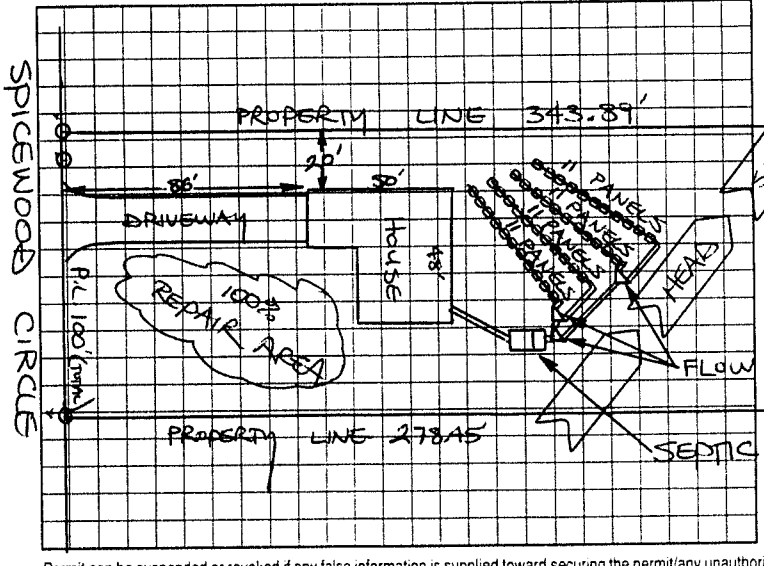
☐ Other ____

Water Supply: ☐ Individual ☑ Public ☐ Community

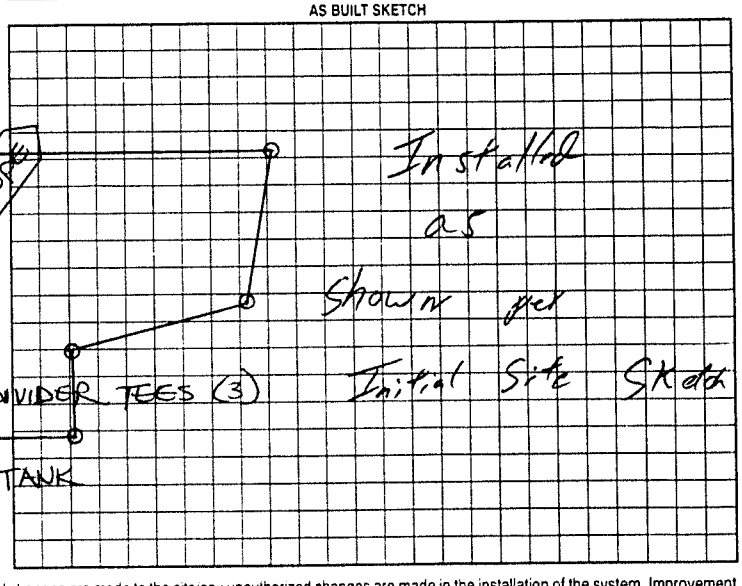
Comments/Conditions: INSTALL 50% REDUCTION SYSTEM AS SHOWN USING 44 PPBPS PANELS IN FOUR EQUAL LENGTH LINES ON CONTOUR ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH LINE.

Comments/Conditions: - Poly Lok Filter Installed
- S.T. Risers Installed

INITIAL SITE SKETCH SCALE: 1" = 50'



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: ____ date 1-30-02 Installed by: Richard Abernathy

Improvement Permit by: STEVE HEDRICK date 1-18-02 Operation Permit by: William A. Johnson date 3/5/02

Authorization to Construct by: STEVE HEDRICK date 1-18-02 Existing System Inspection by: ____ date ____

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