IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 147186 PIN# 4740318114 New PL created to accommodate Septic Area DATE 7-30-08

OWNER OR APPLICANT David Wood PHONE: Business 704-855-2300 Home 704-202-5592

ADDRESS 450 Auction Dr. Salisbury NC 28147

LOCATION Perth Rd N TR Clontz TR Ridge Creek TR Wiltshire TL Panther Creek on left nearend

SUBDIVISION Wiltshire Creek BLOCK / SECTION ____ LOT 23 LOT AREA 2.74Ac SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3 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 400 Linear Feet 200

No Lines 5 @ 40' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth NA ☒ Gravity ☐ Pressure

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

System Description: PPBPS Gravity

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons 6

☐ Business No. Employees ____

☐ Other ____

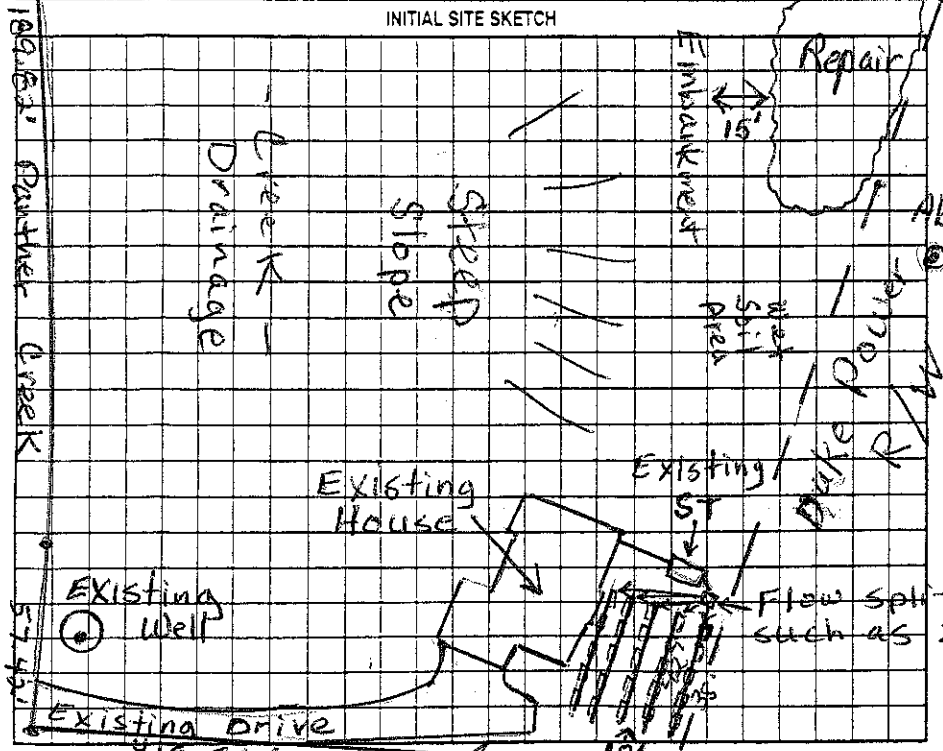
Water Supply: ☒ Individual ☐ Public ☐ Community

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

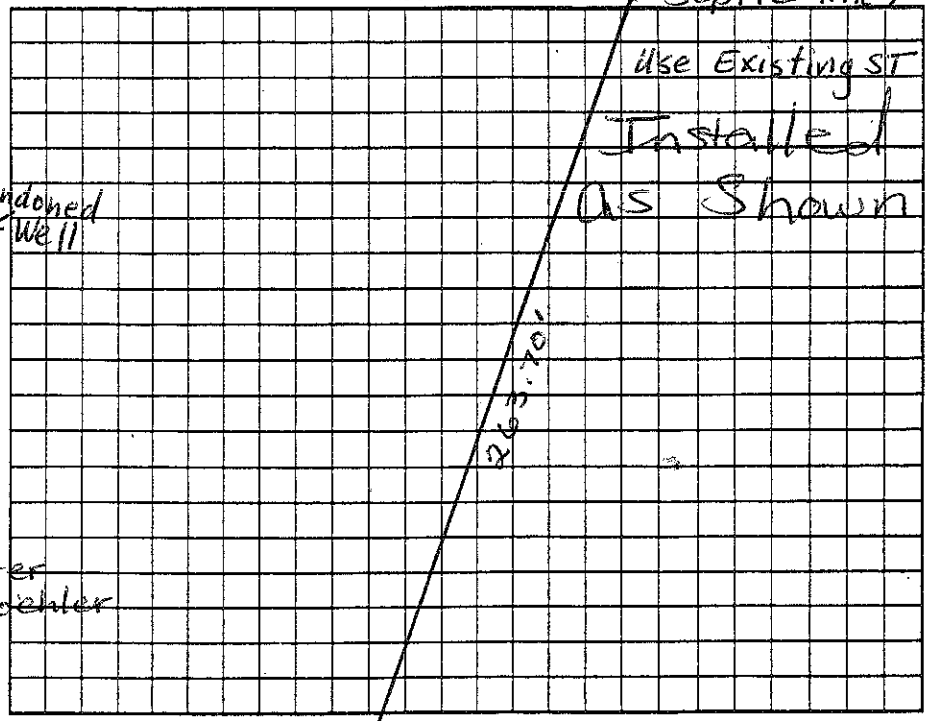
Comments/Conditions: Abandon system in R/W 283.22'

Comments/Conditions: Remove patio to allow for septic lines starting 5' from house. Divert gutter drain away from septic lines

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: David Wood date 8/6/08 Installed by: Rowan Septics

Improvement Permit by: Judy Melville date 7-30-08 Operation Permit by: Mandy Cole date 8/20/08

Authorization to Construct by: Judy Melville date 7-30-08 Existing System Inspection by: ____ date ____

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