123454

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 18-P-05-04 PIN# 4741-55-6271 650561 DATE 6-11-04

OWNER OR CONTRACTOR JEFF DAVIES PHONE: Business 704-664-1717 Home 704-662-2988

ADDRESS 613 PERRY RD TROUTMAN, NC 28166

LOCATION 21 SOUTH (E) PERRY AROUND CURVE ON LEFT BY VALLEY

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.498AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1000 Date 3-7-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 300'
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: 6RAW 2540 RESULT
Repair System Description: LP PANEL
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2½
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☒ Basement wo/plumbing

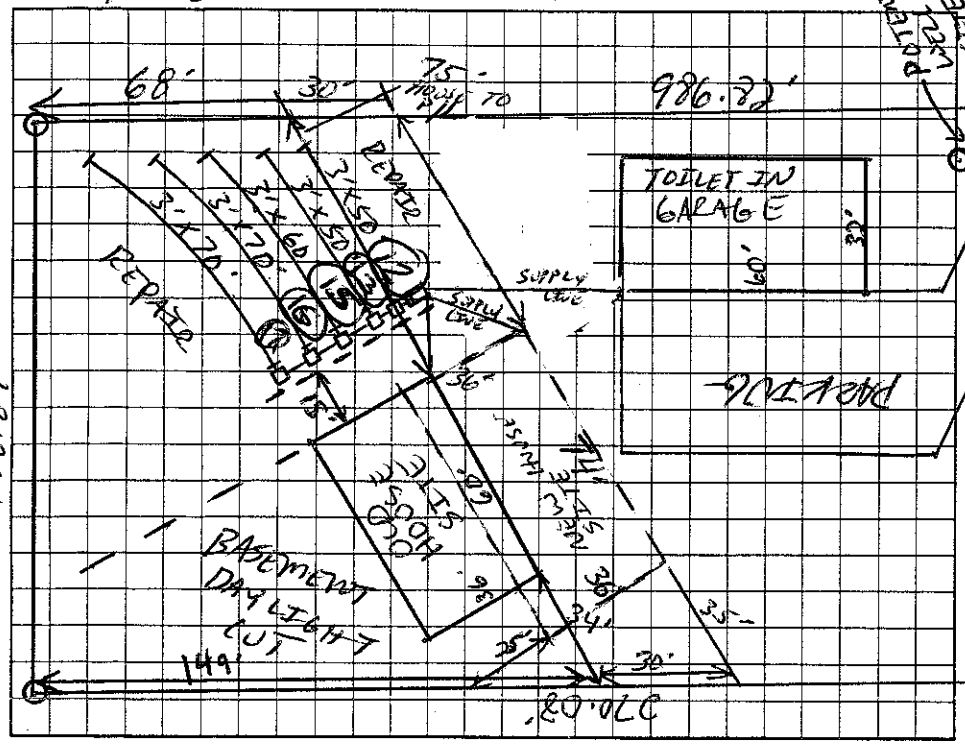
Water Supply: ☒ Individual ☐ Public ☐ Community WELL

Comments/Conditions: (1) KEEP FILL TO SEPTIC TANK BY KEEPING HOUSE OUT OF GROUND & BACKFILLING. (2) INSTALL LINES ON CONTOURS (3) MAINTAIN SETBACKS

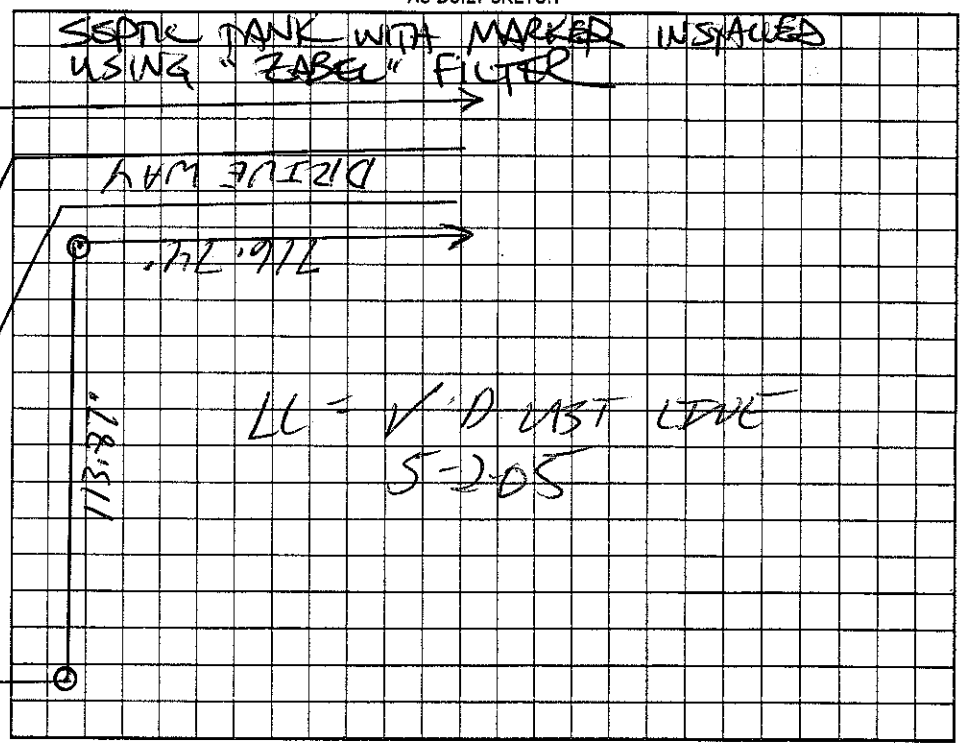
Comments/Conditions: 6-17-04. HOUSE INCREASED TO 74'X36'. HOUSE SITE SLID UP AS DRAWN 25', SEPTIC AREA IS UNAFFECTED BECAUSE HOUSE WILL NOT SLIDE TOWARDS SEPTIC AREA.

1"=50'

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: _____ date 6-17-04 Installed by: WAYNE CLONTZ

Improvement Permit by: _____ date 6-11-04 Operation Permit by: _____ date 5-2-05

Authorization to Construct by: _____ date 6-17-04 Existing System Inspection by: _____ date _____

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