IREDELL COUNTY HEALTH DEPARTMENT

(I/C) 704-400-2066 195'

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

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

PERMIT# 100675 PIN# 4741-78-8148 77-7799 DATE 2-9-04

OWNER OR CONTRACTOR William Brewster PHONE: Business 704-895-0556 Home

ADDRESS P.O. BOX 99 DAVIDSON, NC 28036

LOCATION 21 SOUTH, (L) MURDOCK (R) HOOVER (L) MARTHA VINEYARD, (E) PINTAIL POINTE

SUBDIVISION MARTHA VINEYARD BLOCK / SECTION LOT 32 LOT AREA .78 AC SITE CLASS B DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1017 Date 11-2-03
Pump Tank: 1000 Gallons; PT 17 Date 10-17-03
Pump Make: GOULDS Model WE0311M Serial No. 5049497781
Nitrification Field: No. Fields 1 Square Feet EB=1440 Linear Feet 240'
No Lines 3x80' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, (IV), V, VI
System Description: LOW PRESS PANELS/50% RED
Repair System Description: SAME
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees
☐ Other

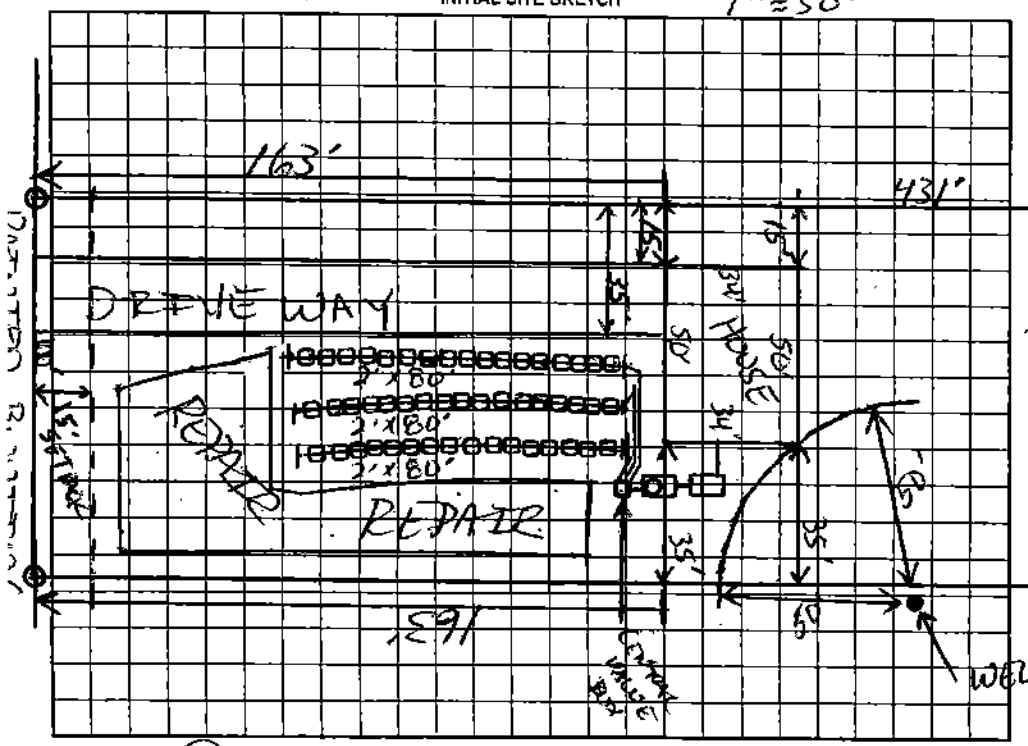
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community WELL

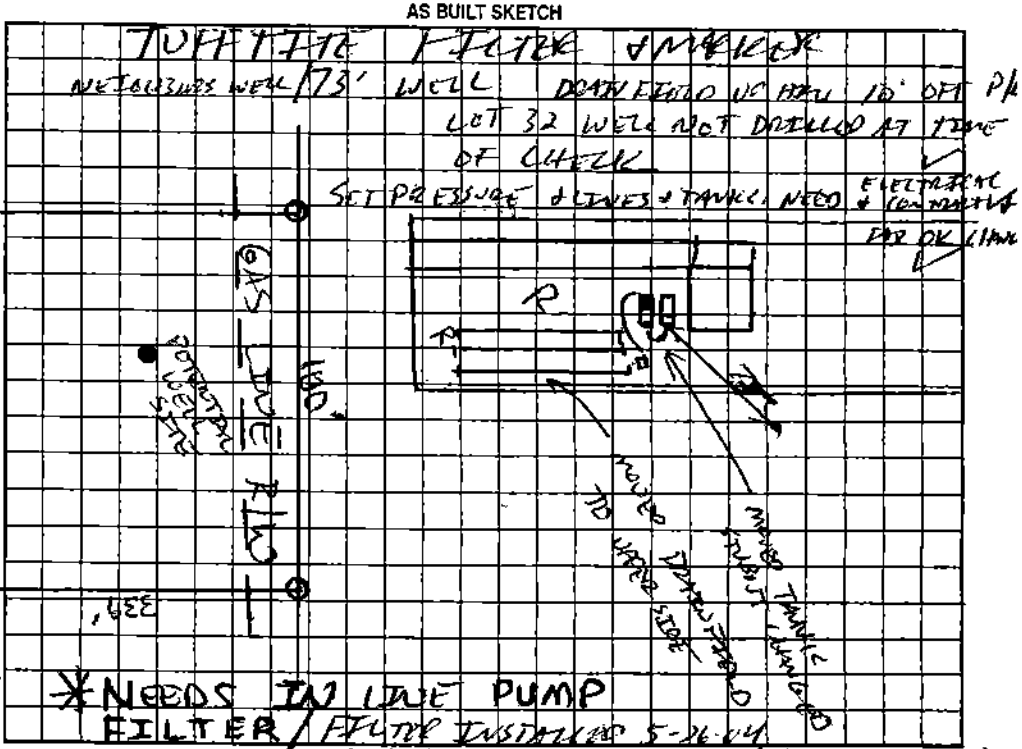
Comments/Conditions: (1) SYSTEM IS FLAGGED OUT COMPLETELY (2) MAINTAIN SETBACKS (3) INSTALL LINES ON CONTOURS (4) SYSTEM IS TYPE IV AND NEEDS A CERTIFIED OPERATOR BY OP IS SIGNED

Comments/Conditions: (5) THIS PERMIT VOIDS PREVIOUSLY ISSUED PERMIT DATED 7-07-01
(6) CALL PRIOR TO INSTALLATION FOR PUMP SIZING & SYSTEM SPECS.

INITIAL SITE SKETCH 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: [signature] date 2/9/04 Installed by: A-1 BACKHOE

Improvement Permit by: [signature] date 2-9-04 Operation Permit by: [signature] date 5-26-04

Authorization to Construct by: [signature] date 2-9-04 Existing System Inspection by: date

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