IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT REPLACES (called by) PREVIOUS ISSUED 7-27-01

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

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

PERMIT# 100678 PIN# 4741-78-6097 DATE 6-29-05

OWNER OR CONTRACTOR WILLIAM BREWSTER PHONE: Business 704-895-0556 Home

ADDRESS P.O. Box 99 DAVIDSON NC 28036

LOCATION US 21 S, TL MURDOCK RD, TR HOOVER RD, TL MARTHA'S VINEYARD, TR PAINTED BUNTING DR LOT #35 ON RIGHT

SUBDIVISION MARTHA'S VINEYARD BLOCK / SECTION II LOT 35 LOT AREA 0.785 ACRE SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1000 Gallons; STB TP-1012-100 Date 4-5-05

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines FIVE 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: 25% REDUCTION, GRAVITY

Repair System Description: 25% REDUCTION, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

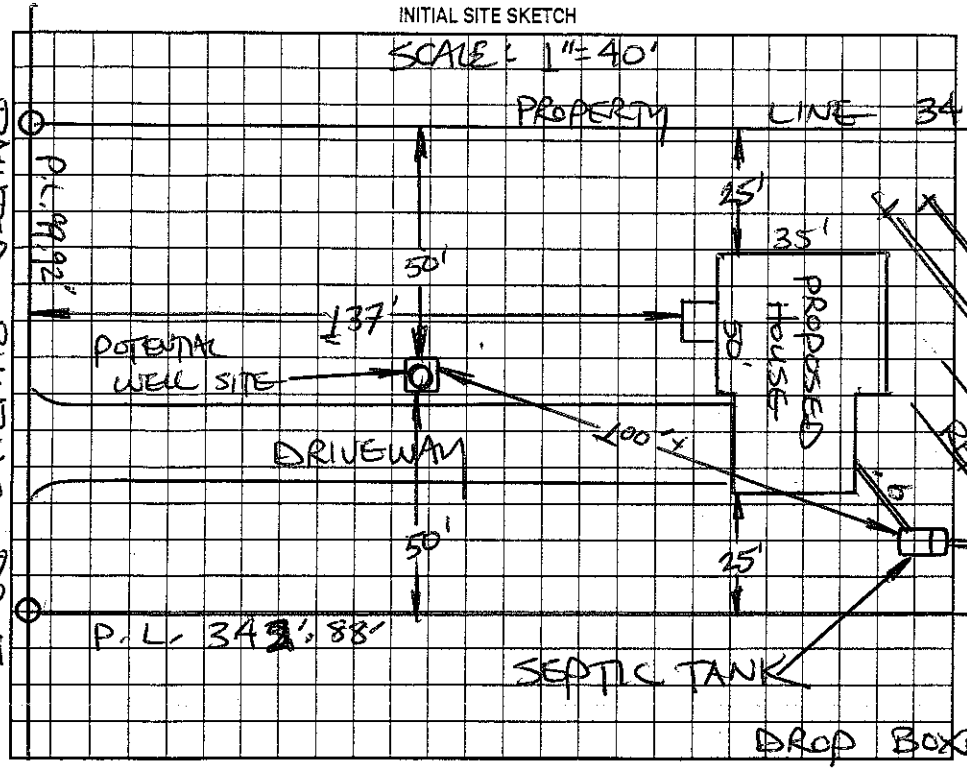
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

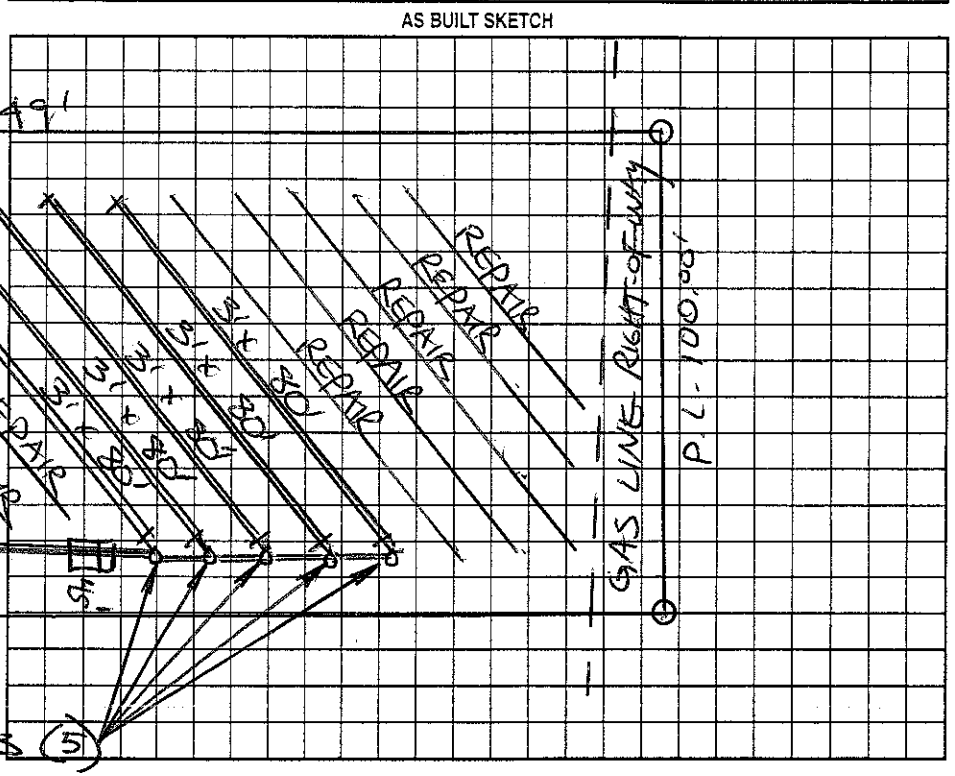
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS SHOWN.

Comments:/Conditions: Yellow Filter Septic Tank Marker

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 Angie Blount date 7/15/05 Installed by: A-1 Backhoe

Improvement Permit by: STEVE HEDRICK date 6-29-05 Operation Permit by: James Stewart date 10-26-05

Authorization to Construct by: STEVE HEDRICK date 6-29-05 Existing System Inspection by: ____ date ____

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