# IREDELL COUNTY HEALTH DEPARTMENT

CI

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

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

PERMIT# 100648 PIN# 4741871876 DATE 1-18-06

OWNER OR CONTRACTOR Colleen Brewster PHONE: Business _____ Home _____

ADDRESS 6099 Davidson NC 28036

LOCATION 115 Exit 45 (R) TL onto Murdock (L) Hoover TL Marthas Vineyard TL 4th Stop Sign

SUBDIVISION Marthas Vineyard BLOCK / SECTION 2 LOT 17 LOT AREA .726 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1012 Date 4-12-05
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields ___ Square Feet 1920 Linear Feet 320
No Lines 8 Trench Width 24" Max Trench Bottom Depth 36 Gravel Depth NA

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 50% Gravity
Repair System Description: 2 PP
Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ___
☐ Business No. Employees ___
☐ Other _____

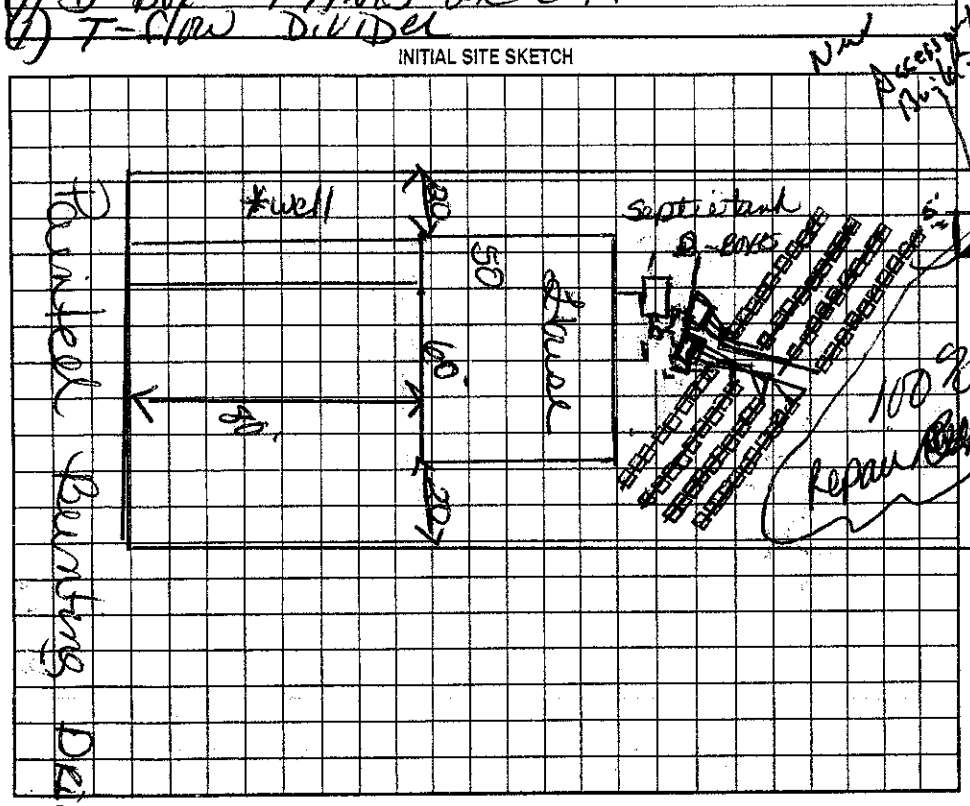
Water Supply: ☑ Individual ☐ Public ☐ Community

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

Comments/Conditions: (2) Distribution boxes
(1) D-box - 4 lines on Right
(1) D-box - 4 lines on Left
(1) T-Flow Divider

Comments/Conditions:
* Install on contour
* maintain all setbacks
* Lines must be equal length and equal distributed - no more than 50' each

INITIAL SITE 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 _____
Improvement Permit by: _____ date 1-18-06
Authorization to Construct by: _____ date 1-18-06

Installed by: A-1 Backhoe
Operation Permit by: _____ date 1-20-06
Existing System Inspection by: _____ date _____