*THIS PERMIT REPLACES PREVIOUS PERMIT, ISSUED ON 08/14/20

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 100652 PIN# 4741-87-3692 DATE 06/29/06

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

ADDRESS P.O. BOX 99 DAVIDSON, NC 28036

LOCATION HWY 21 SOUTH, (L) MURDOCK RD, (R) HOOVER RD., (L) MARTHA'S VINEYARD, (R) PAINTED BUNTING, LOT ON LEFT,

SUBDIVISION MARTHA'S VINEYARD BLOCK / SECTION LOT 20 LOT AREA 0.8 ACRES SITE CLASS. PS DESIGN FLOW 480 GPD L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1,000 Gallons; STB 1012 Date 4-22-06
Pump Tank: 1,000 Gallons; PT 17 Date 7-23-06
Pump Make: GOULDS Model WE0311M Serial No. J0679218
Nitrification Field: No Fields 1 Square Feet EQ to 1,920 Linear Feet 340'
No Lines 6 @ 57' Trench Width 24" Max Trench Bottom Depth 36"

[X] New System [ ] Repair [ ] Expansion System Type: I II III (IV) V VI
System Description: LOW PRESSURE, 50% REDUCTION
Repair System Description: LOW PRESS., 50% REDUC.
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Persons
[ ] Business No. Employees
[ ] Other

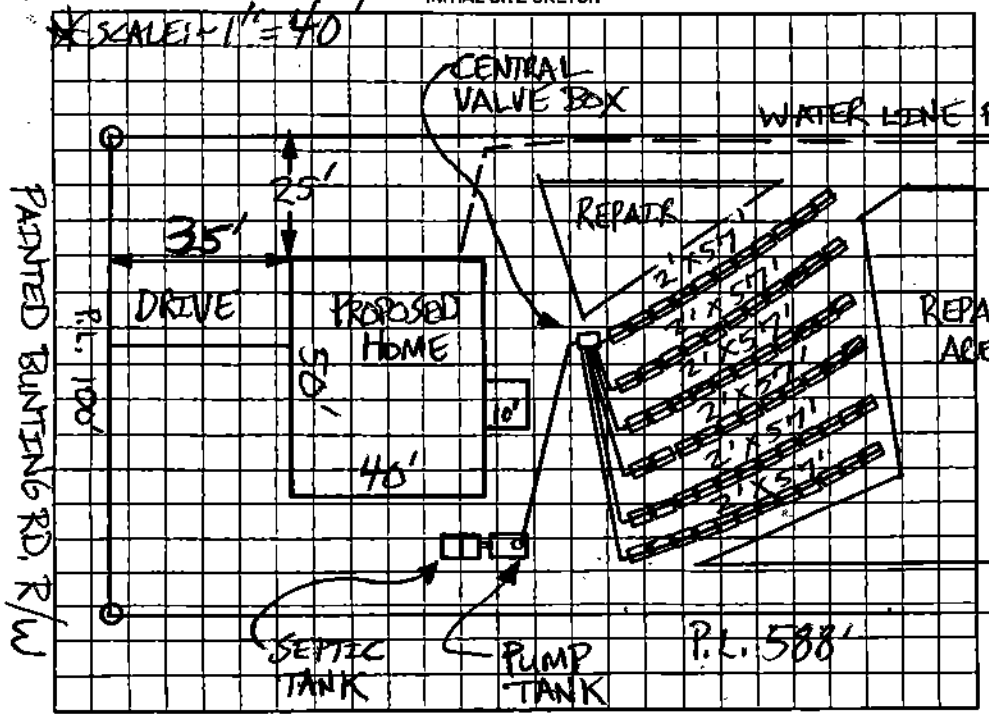
Water Supply: [X] Individual WELL [ ] Public [ ] Community

Gravel Depth N/A [ ] Gravity [X] Pressure [X] Slab [ ] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

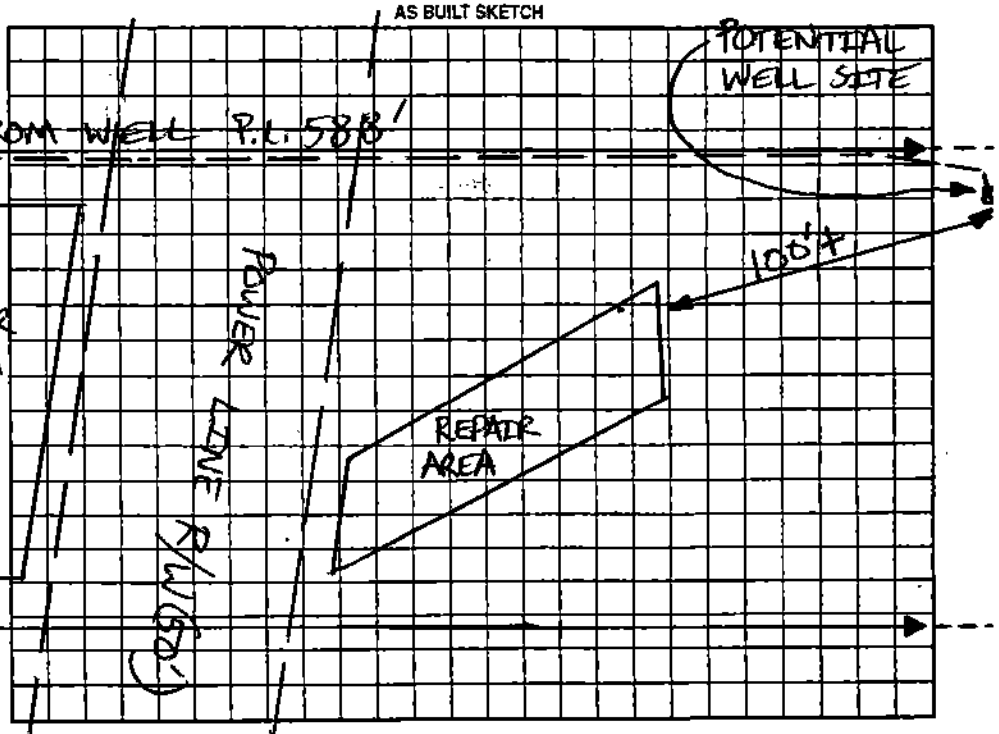
Comments/Conditions: (1) USE 13 PANELS PER LINE. (2) RUN WATER LINE FROM WELL ALONG TOP PROPERTY LINE AS SHOWN, 10'+ FROM SEPTIC. (3) SEE ATTACHED PUMP + VALVE, PRESSURE INFO SHEETS. (4) RAKE + LIME TRENCHES

Comments/Conditions: BEFORE PLACING SAND IN, (5) PLACE IN-LINE FILTER IN PUMP TANK AS SHOWN IN DIAGRAM ATTACHED, TUFFTITE Filter Model R.S. OK'D WELL LOCATION CHANGED TO FRONT LEFT CORNER OF LOT.

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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Permit with plat valid without expiration [ ] Improvement Permit with site plan valid for sixty months [X]

Signed: Angie Brewster date 7/14/06 Installed by: D. GAITHER

Improvement Permit by: [signature] date 06/29/06 Operation Permit by: [signature] date 12-22-06

Authorization to Construct by: [signature] date 06/29/06 Existing System Inspection by: date

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