IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (1) MOORESVILLE 704-664-5281

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

PERMIT# 138197 PIN# 4741-90-0012 DATE 09/26/06

OWNER OR APPLICANT TODD HOUSTON PHONE: Business 980-721-4624 Home 704-528-1393

ADDRESS P.O. BOX 428 TROUTMAN, NC 28166

LOCATION HWY 21 SOUTH, (L) OSTWALT AMITY RD., < 1 MILE ON LEFT @ BOX #229.

SUBDIVISION N/A BLOCK / SECTION — LOT — LOT AREA 1 ACRE SITE CLASS PS DESIGN FLOW 480 GPD L.T.A.R. 0.30 GPD/FT²

EXIST.

Septic Tank: 1,000 Gallons; STB 928 Date 05/16/95
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 330 NEW Linear Feet 110' NEW
No Lines 1 NEW Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☐ New System ☐ Repair ☒ Expansion System Type: I (II) III IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 50% REDUC., LOW PRESS.
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other ____

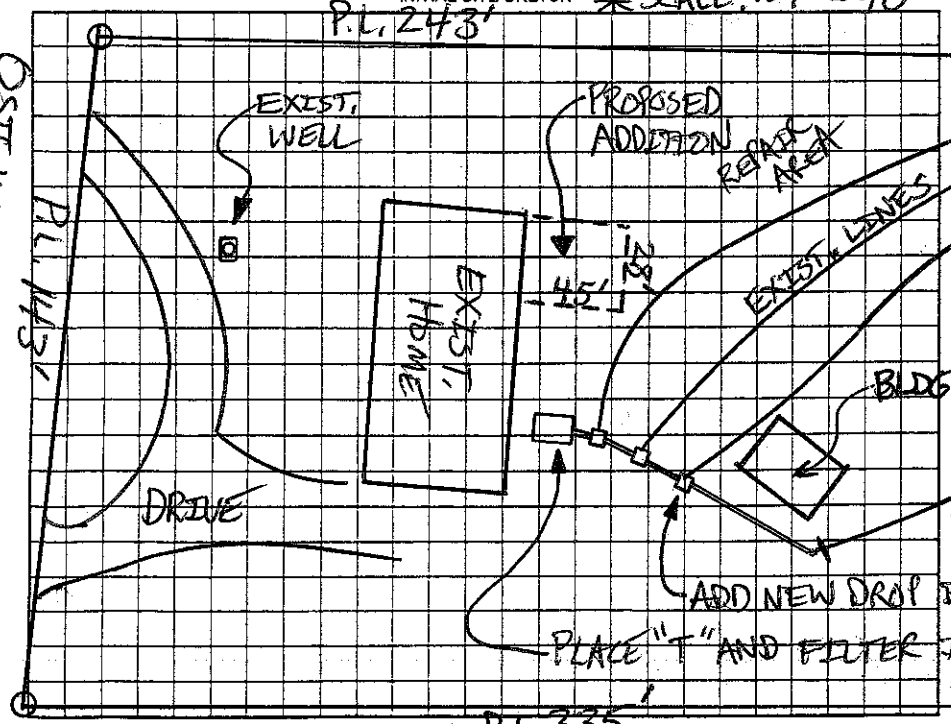
Water Supply: ☒ Individual EXIST. WELL ☐ Public ☐ Community

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

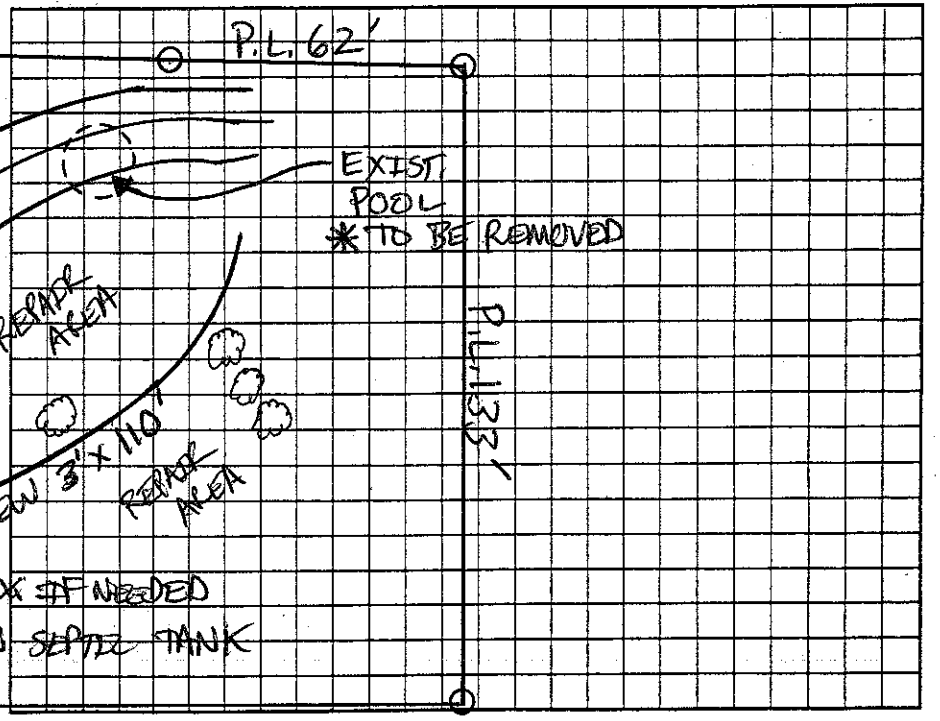
Comments:/Conditions:
(1) START NEW DRAIN LINE AT 30" DEEP.
(2) INSTALL SAN. "T" AND FILTER IN SEPTIC TANK.
(3) IF NO DROP BOX ON 3rd LINE, INSTALL ONE.

Comments:/Conditions:
SYSTEM EXPANDED ACCORDING TO INITIAL SITE SKETCH

INITIAL SITE SKETCH *SCALE: ≈ 1" = 40'



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 9/26/06 Installed by: SAMMY REAVIS

Improvement Permit by: [signature] date 09/26/06 Operation Permit by: STEVE HEDRICK date [illegible]

Authorization to Construct by: [signature] date 09/26/06 Existing System Inspection by: ____ date ____

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