IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 2-20-2004 (CT)

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

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

PERMIT# 118075 PIN# 4747-43-5133 DATE 7-1-05

OWNER OR CONTRACTOR D & N LLC PHONE: Business 704-902-0799 Home

ADDRESS P.O. BOX 5031 STATESVILLE NC 28687

LOCATION HWY 21 N, TL JENNINGS RD, TL WHITES FARM RD, TR FOX GLOVE DR, LOT #31 ON LEFT

SUBDIVISION GRAYSTONE MEADOWS BLOCK / SECTION 1 LOT 31 LOT AREA 1.0 ACRE SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-14-05

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1600 Linear Feet 400

No Lines SIX Trench Width 36" Max Trench Bottom Depth 32"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI

System Description: 25% REDUCTION GRAVITY

Repair System Description: 50% REDUCTION LOW PRESSURE

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms ____ No. Employees ____

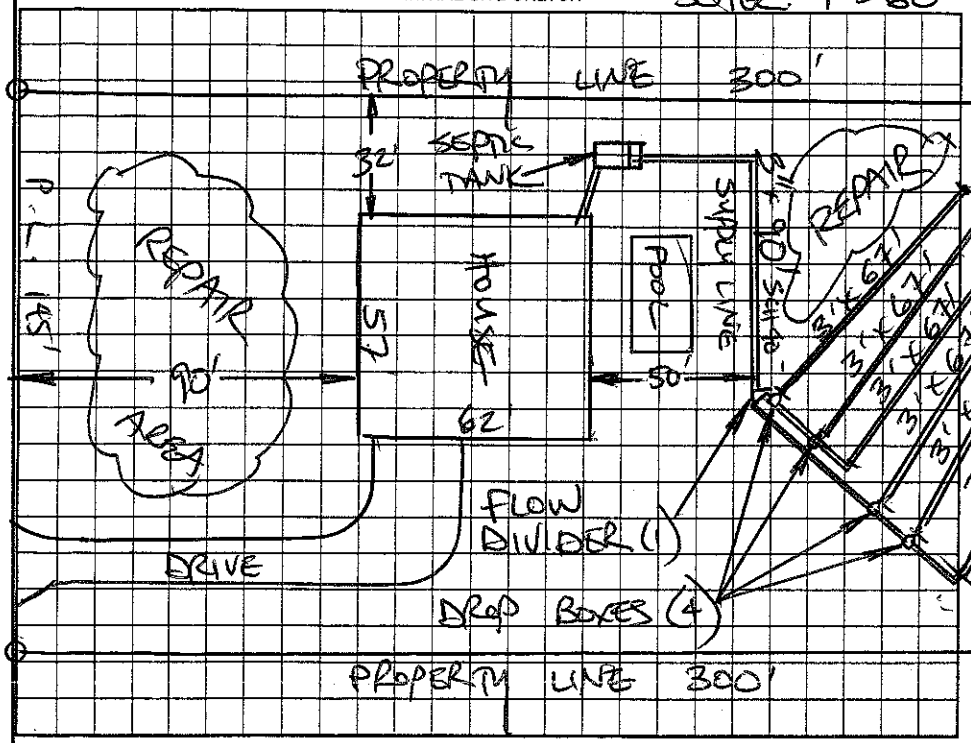
Gravel Depth N/A ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

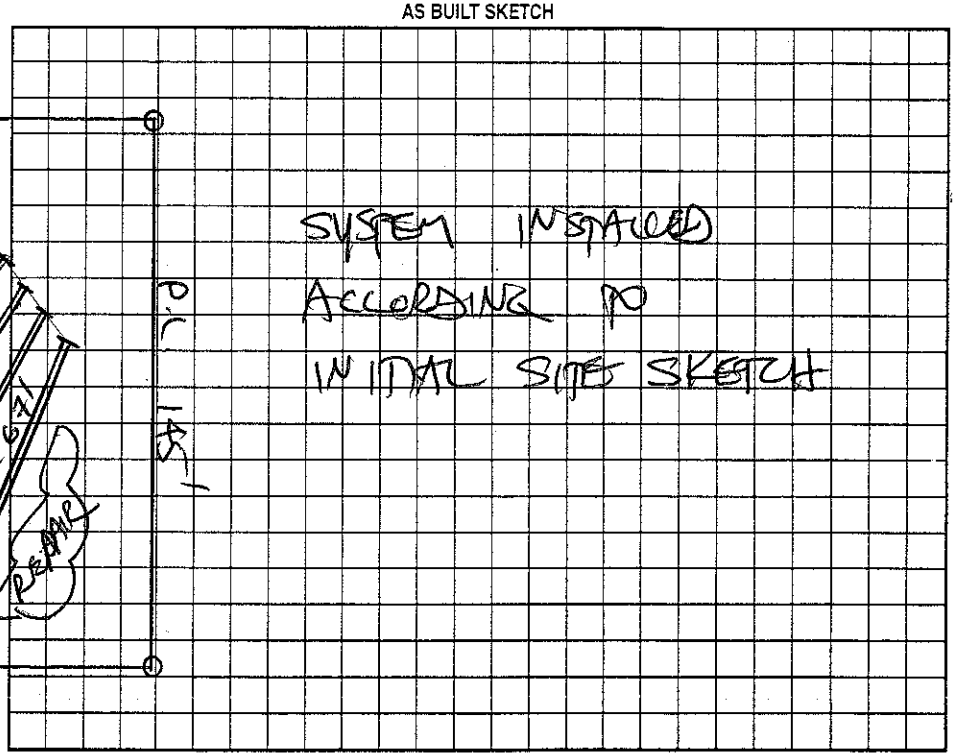
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM AS FLAGGED NO DEEPER THAN 32"

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFFITE" FILTER

INITIAL SITE SKETCH SCALE: 1"=60'



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: _____ date 7-7-05 Installed by: DAVID YOUNTS

Improvement Permit by: STEVE HEDRICK date 7-1-05 Operation Permit by: STEVE HEDRICK date 7-6-05

Authorization to Construct by: STEVE HEDRICK date 7-1-05 Existing System Inspection by: _____ date _____

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