# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 127387 PIN# 4747-55-6269 DATE 5-10-05

OWNER OR CONTRACTOR COOL SPRINGS BUILDERS, INC., PHONE: Business 986-399-5943 Home 704-873-0839

ADDRESS 395 OLD MOCKSVILLE ROAD, STATESVILLE, NC 28625

LOCATION US 21 N, TL JENNINGS RD, TL [illegible] FARM RD, TL DONSDALE DR, LOT # 14 ON LEFT

SUBDIVISION DONSDALE BLOCK / SECTION 7 LOT 14 LOT AREA 0.84 ACRE SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.40 GPD/FT

Septic Tank: 1000 Gallons; STB 1012 Date 4-03-05

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 60 @ 1200 Linear Feet 300

No Lines THREE 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 CONVTN

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 ____

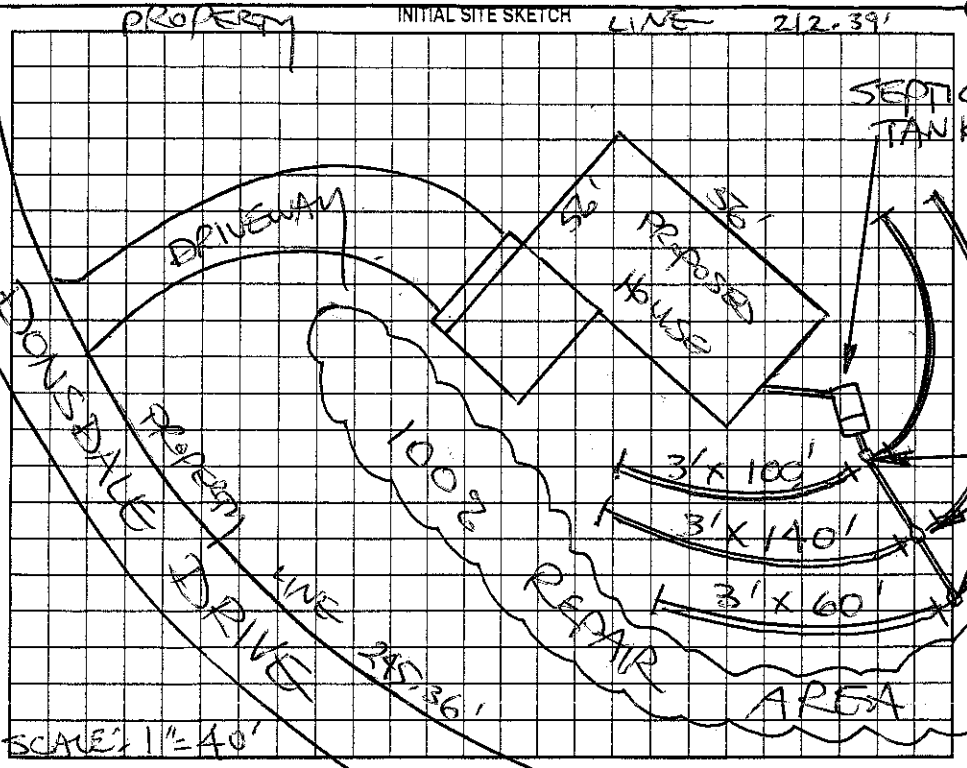
☑ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

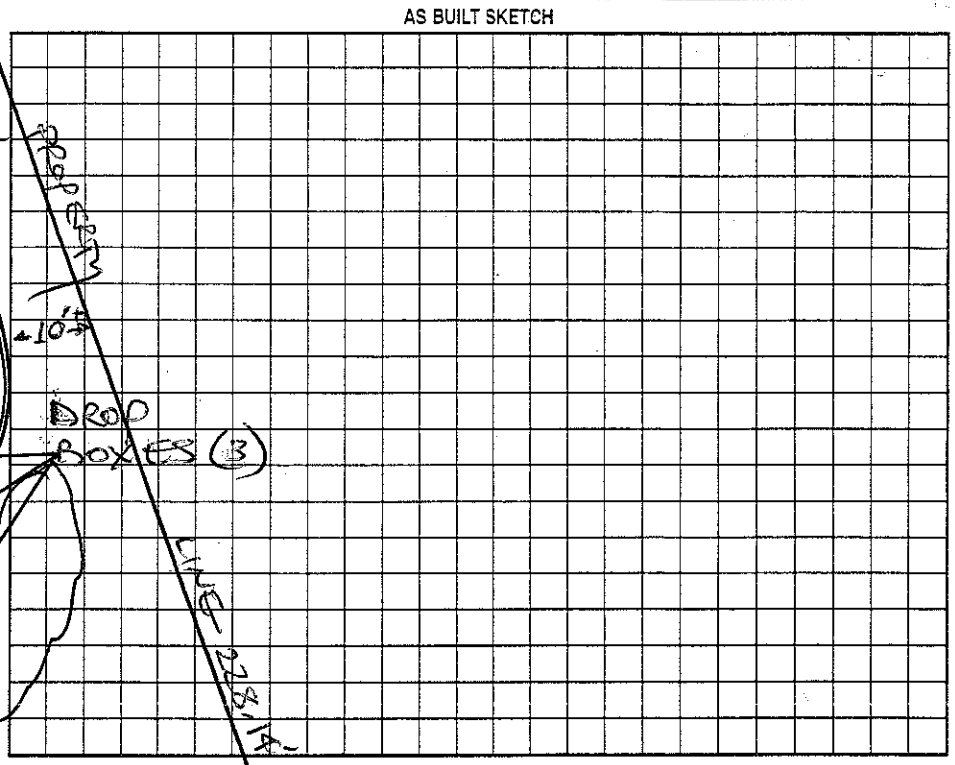
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR AS FLAGGED

Comments:/Conditions: yellow 1st tote filter installed Septic tank riser installed

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: _____ date 5-13-05 Installed by: Steve Jordan

Improvement Permit by: STEVE HEDRICK date 5-10-05 Operation Permit by: _____ date 10-27-05

Authorization to Construct by: STEVE HEDRICK date 5-10-05 Existing System Inspection by: _____ date _____

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