# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(C1)

PERMIT# 124323 PIN# 4772-47-8678 DATE 10-21-04

OWNER OR CONTRACTOR BRENDA MILLER PHONE: Business 704-560-1852 Home 704-896-8119

~~ADDRESS~~ 18525 SHEARER ROAD DAVIDSON, NC 28036

LOCATION US 70 EAST, TR TRIPLETT ROAD, 1.2 MILES ON LEFT, 0.25 MILE OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 5.78 ACRES SITE CLASS. PS' DESIGN FLOW 360 L.T.A.R. 0.20 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 8-22-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 600
No Lines SIX Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

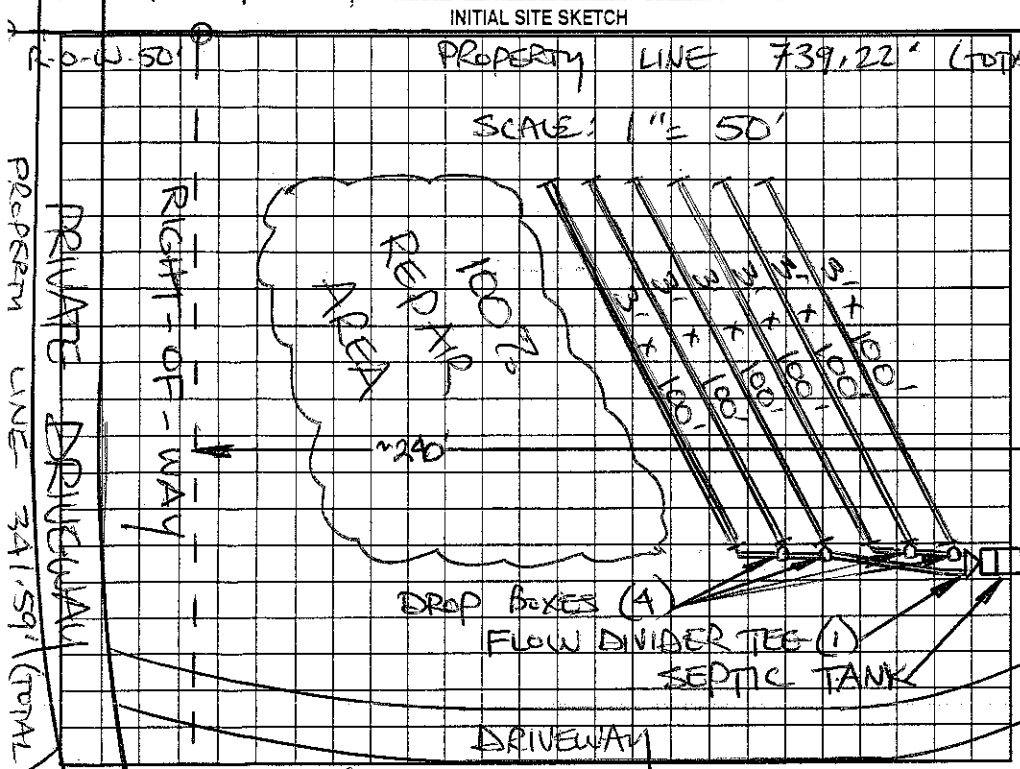
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ~~Individual~~ ☑ Public ☐ Community ~~WELL~~

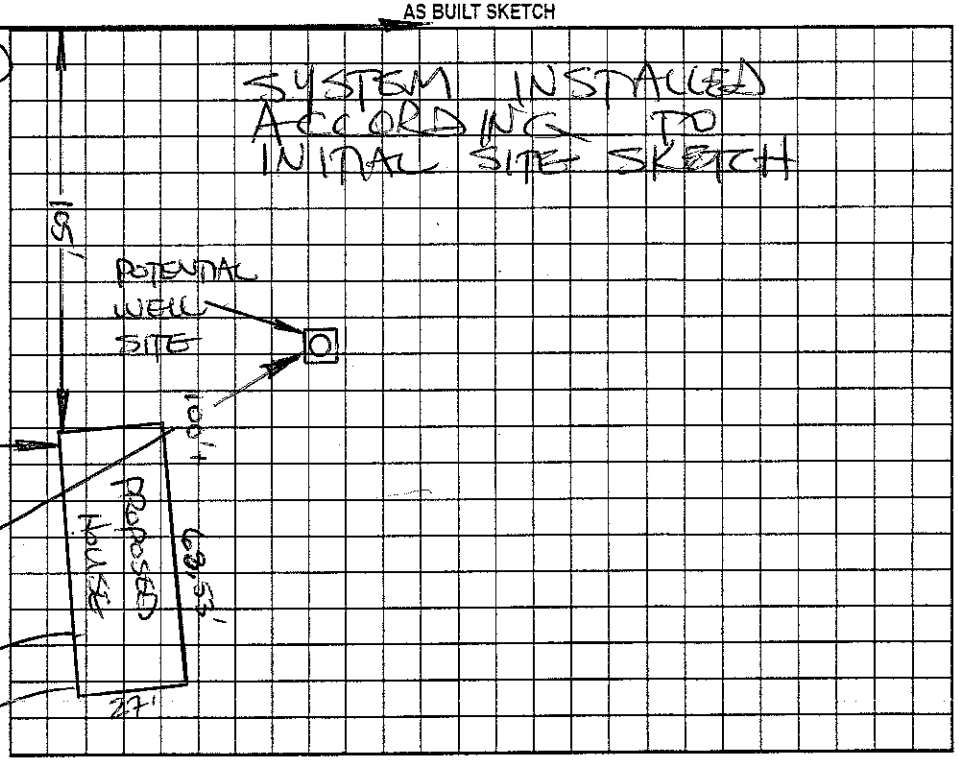
Comments:/Conditions: INSTALL DRAINLINES ON CONTOUR AS FLAGGED. USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES AS SHOWN.

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

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: [signature] date 10-21-04 Installed by: SPECIALTY SEPTIC

Improvement Permit by: STEVE HEDRICK date 10-21-04 Operation Permit by: STEVE HEDRICK date 3-7-05

Authorization to Construct by: STEVE HEDRICK date 10-21-04 Existing System Inspection by: _____ date _____

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