CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 139204 PIN# 4774-26-8770 DATE 11/29/06

OWNER OR APPLICANT STEVE TROUTMAN PHONE: Business 828-466-8972 Home 704-878-6162

ADDRESS 167 CARTER LN, STILL, NC 28625

LOCATION HWY 64 EAST, (R) NEW SALEM RD., (L) BLAYTHORNE LN., LOT ON RIGHT @ END.

SUBDIVISION BRIARCLIFF BLOCK / SECTION IV LOT 6 LOT AREA 0.87 AC. SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1,000 Gallons; STB 1012 Date 5-9-07
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ to 1,600 Linear Feet 280'
No Lines 8@35' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 50% REDUCTION, GRAVITY
Repair System Description: 50% REDUC., PUMP/L.P.
Maintenance Agreement Required: ☐ Yes ☒ No

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

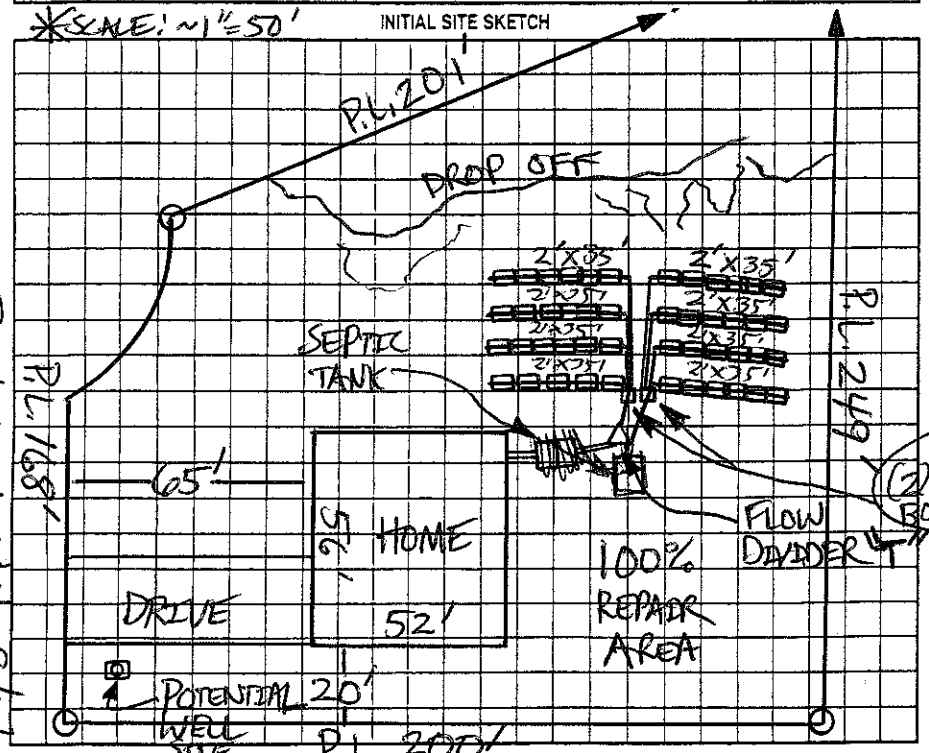
Water Supply: ☒ Individual WELL ☐ Public ☐ Community

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

Comments:/Conditions:

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LC VD LAST LINES & TRUE DEPTH 12-3-07

*SCALE: ~1"=50' INITIAL SITE SKETCH



*SET LEVELERS & LVL AS BUILT SKETCH

(2) DISTRIBUTION BOXES W/ SPEED LEVELERS
OR
(2) EFFLUENT SPLITTER BOXES (SUCH AS ZOELLER "TRUE-FLOW SPLITTER")

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: Stephen P. Thornton date 11/6/07
Improvement Permit by: [signature] date 11/29/06
Authorization to Construct by: [signature] date 6-11-07

Installed by: Craig Thompson
Operation Permit by: [signature] date 12-4-07
Existing System Inspection by: ____ date ____

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