IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 116397 PIN# 4775-15-9486 DATE 10-21-03

OWNER OR CONTRACTOR TERRATEK PHONE: Business 704-902-0119 Home 704-872-6683

ADDRESS 630 SIGNAL DRIVE EXT, STATESVILLE, NC 28625

LOCATION US 64 EAST, TL SAIN ROAD, TL SPRING FOREST DRIVE, 2ND LOT ON LEFT

SUBDIVISION SPRING FOREST BLOCK / SECTION ____ LOT 40 LOT AREA 0.7101 ACRE SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 5-4-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet TO 1600 Linear Feet 400+
No Lines SIX 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 GRAVITY
Repair System Description: 50% REDUCTION LOW PRESS
Maintenance Agreement Required: ☐ Yes ☑ No

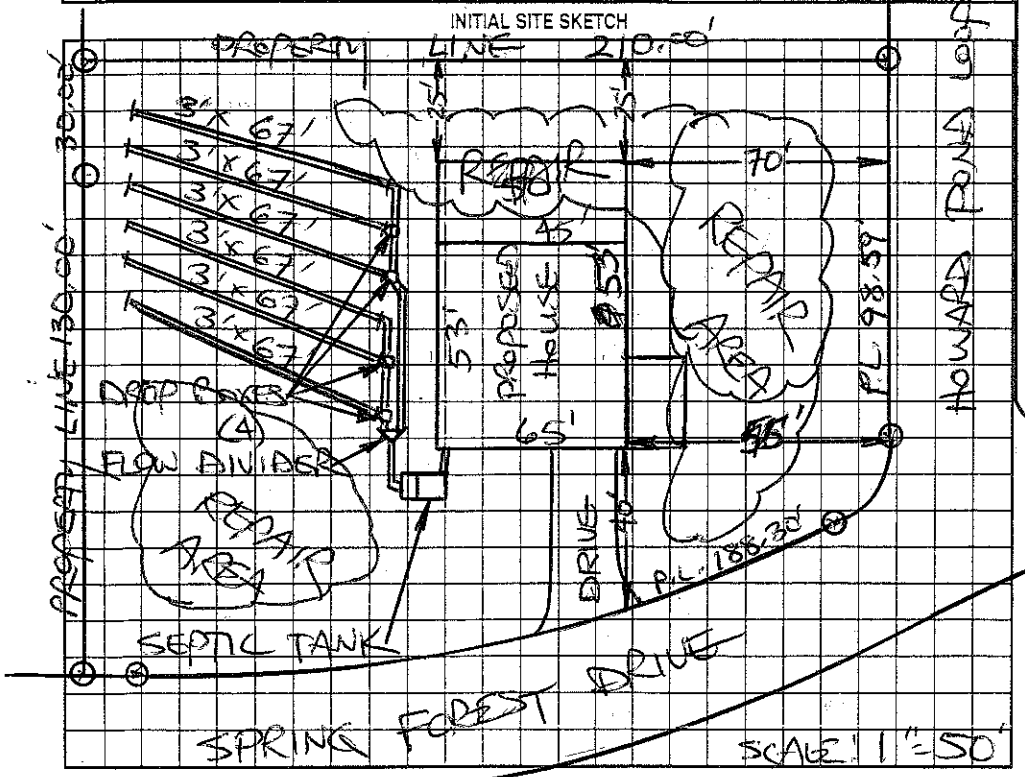
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR IN SIX EQUAL LENGTH LINES

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

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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 11-21-03 Installed by: DAVID YOUNTZ

Improvement Permit by: STEVE HEDRICK date 10-21-03 Operation Permit by: STEVE HEDRICK date 9-16-04

Authorization to Construct by: STEVE HEDRICK date 4-27-04 Existing System Inspection by: ____ date ____

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