(C)

# IREDELL COUNTY HEALTH DEPARTMENT

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

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

(C1)

PERMIT# 139738 PIN# 4776-71-2849 DATE 1-6-07

OWNER OR APPLICANT SPEAR CONSTRUCTION PHONE: Business 704-202-4964 Home 704-636-7954

ADDRESS 128 SWANN CROSSING DRIVE, STATESVILLE NC 28625

LOCATION US 64 EAST, TR SWANN ROAD, TL SWANN CROSSING DRIVE, 4TH LOT ON RIGHT

SUBDIVISION SWANN CROSSING BLOCK / SECTION II LOT 9 LOT AREA 0.495 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB Rowan 375 Date 3-5-07
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 200
No. Lines Four Trench Width 24" Max Trench Bottom Depth 36" Depth 24"

☑ New System ☐ Repair ☐ Expansion System Type: I ☐ II ☑ III ☐ IV ☐ V ☐ VI
System Description: 50% REDUCTION, GRAVITY
Repair System Description: 50% REDUCTION, LOW PRESSURE
Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons ____ No. Employees ____

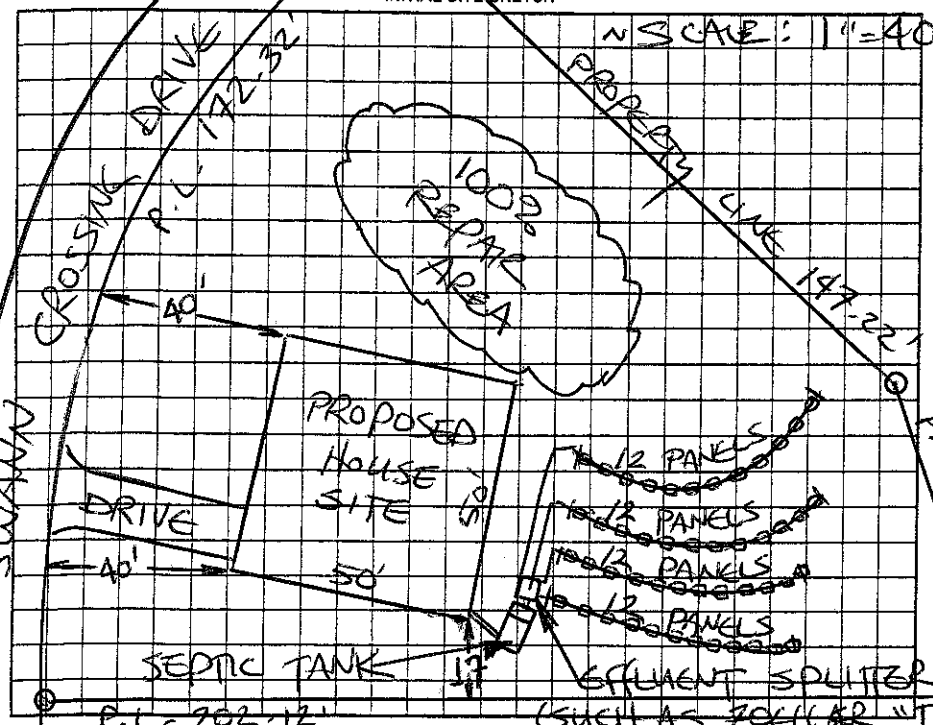
Water Supply: ☐ Individual ☑ Public ☐ Community

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

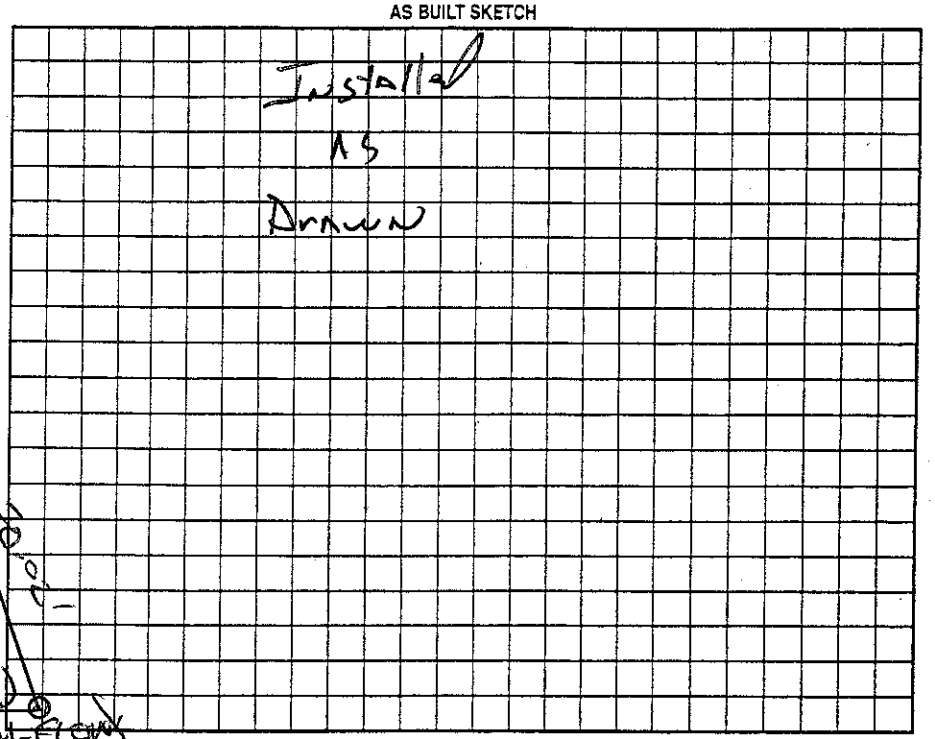
Comments/Conditions: INSTALL 50% REDUCTION SYSTEM USING 48 PPBS PANELS @ ON CONTOUR AS SHOWN (1) USE ONE EFFLUENT SPLITTER TO ACHIEVE EQUAL DISTRIBUTION INTO EACH LINE

Comments/Conditions: Filter 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 1/8/06

Improvement Permit by: STEVE HEDRICK date 1-6-07

Authorization to Construct by: STEVE HEDRICK date 3-21-07

Installed by: Rowan Septic

Operation Permit by: _____, R.S. date 27 June 07

Existing System Inspection by: _____ date _____

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