IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 90422 PIN# 4776 82 2188 DATE 7-20-00

OWNER OR CONTRACTOR D + D Enterprizes PHONE: Business 528 6192 Home

ADDRESS PO Box 252 Troutman NC. 28166

LOCATION 64 E To Swann Rd TR Poplar leaf at end on left.

SUBDIVISION Fifthcrock Est. BLOCK / SECTION LOT 9 LOT AREA .85acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 799 Date 3-2-01
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Conv. Gravity (Shallow)
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☑ No

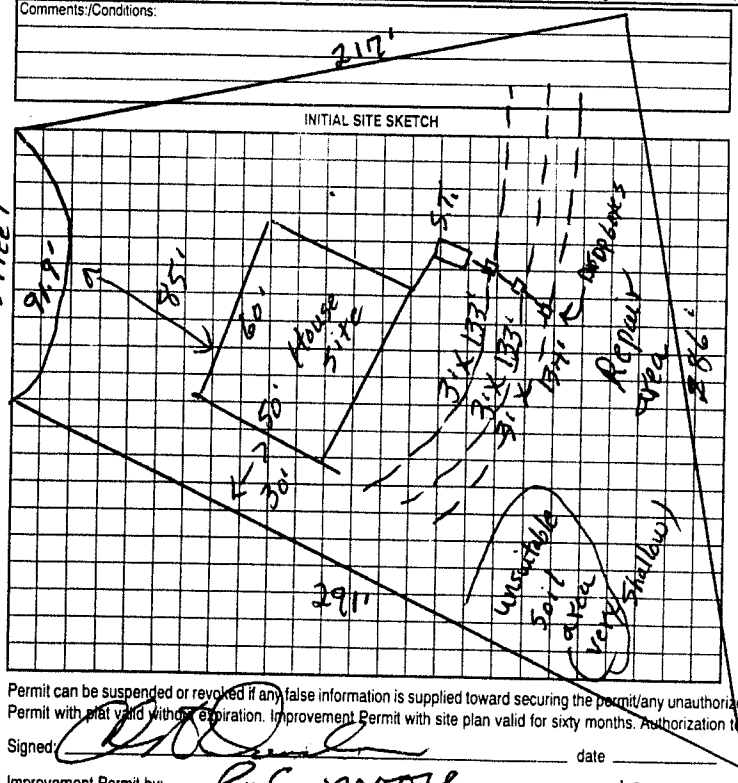
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions:

Comments/Conditions: SYSTEM INSTALLED AS SHOWN WITH MARVEL+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: date Installed by: TOMMY FRYE

Improvement Permit by: P.C. Moore date 7-20-00 Operation Permit by: date 5-4-01

Authorization to Construct by: P.C. Moore date 7-20-00 Existing System Inspection by: date

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