# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 41385 PIN# 4779~~5703~~82 499371 DATE 4-16-2007

OWNER OR APPLICANT John M Brown PHONE: Business _____ Home 704-528-3899

ADDRESS 195 Peak RD Troutman, NC 28166

LOCATION 21N TR Glenwood Valley ab end

SUBDIVISION Glenwood Village BLOCK / SECTION _____ LOT 1 LOT AREA 8.0 AC SITE CLASS. R5 DESIGN FLOW 480 L.T.A.R. .13

Septic Tank: 1000 Gallons; STB 1012 Date 6-16-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field, No Fields ___ Square Feet 1600 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons ___ No. Employees ___

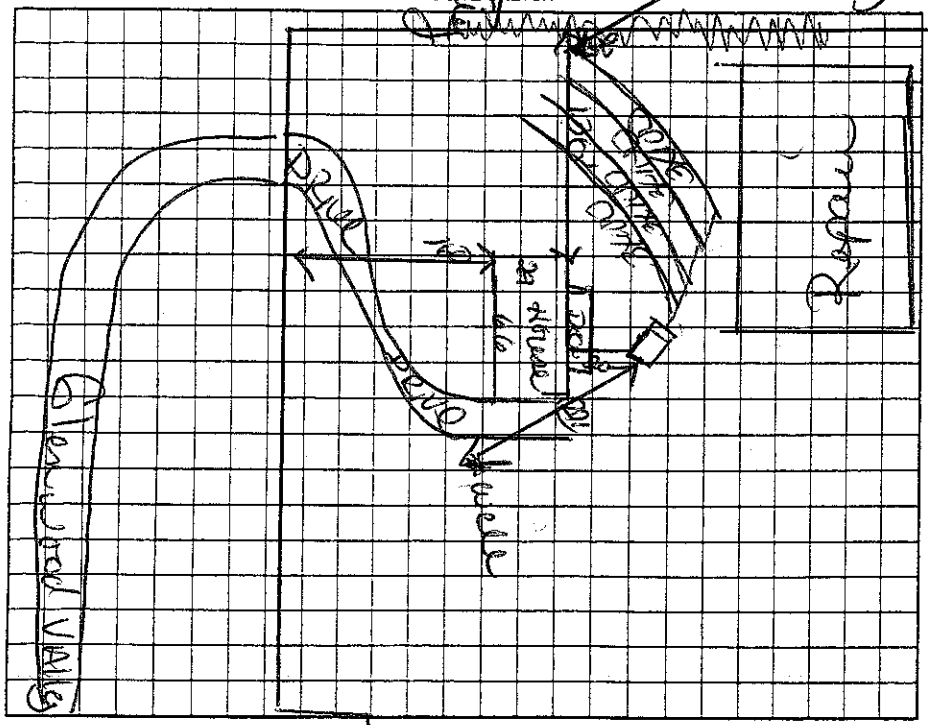
Water Supply: ☑ Individual ☐ Public ☐ Community

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

Comments/Conditions: Install on contour
Maintain all setbacks
25' from gully

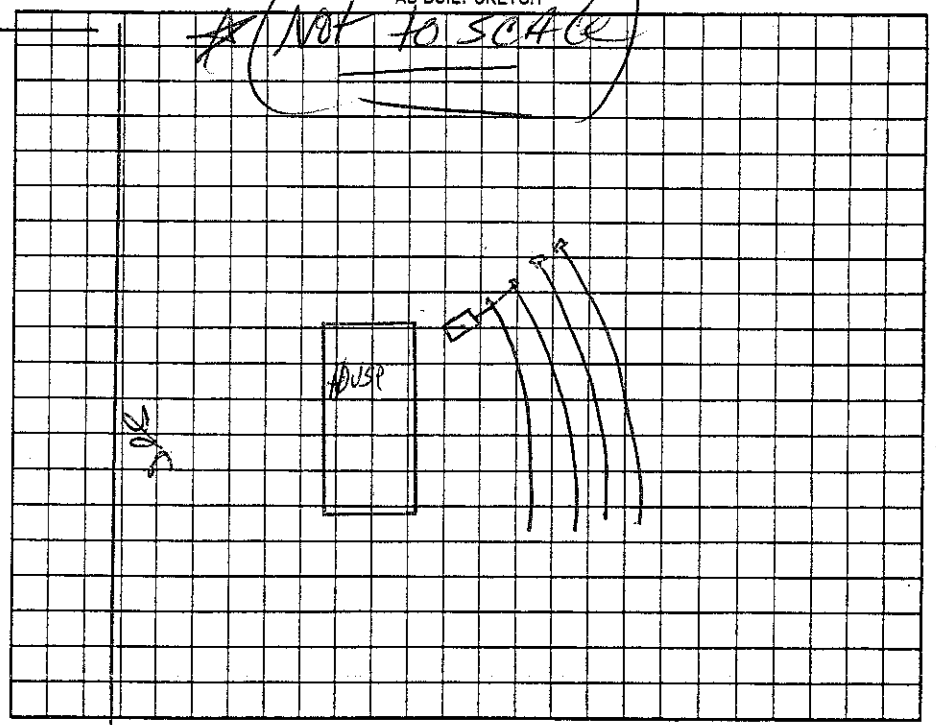
Comments/Conditions:
After basement is complete -
Call for flaggings - Because of cut

INITIAL SITE SKETCH




AS BUILT SKETCH

~~X~~ Not to scale




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: John M Brown date 4-10-07 Installed by: Tommy Frye

Improvement Permit by: Reed Cook date 4-10-07 Operation Permit by: _____ date 10-3-07

Authorization to Construct by: Reed Cook date 4-10-07 Existing System Inspection by: _____ date _____

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