IREDELL COUNTY HEALTH DEPARTMENT

CI

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

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

PERMIT# 13174 PIN# 4843028509 DATE 11-17-05

OWNER OR CONTRACTOR FULL SPECTRUM HOMES PHONE: Business 704-746-5312 Home

ADDRESS P.O BOX 1049 TROUTMAN N.C. 28166

LOCATION 77 North (L) 901 (R) TWO MILE (R) AT SIGN # 618

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.83 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 1-29-06
Pump Tank: 1000 Gallons; PT 17 Date 1-22-06
Pump Make: GOULDS Model WE03311M Serial No: K0577436
Nitrification Field: No Fields 1 Square Feet EG=1200' Linear Feet 300'
No Lines 3X100' 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: PUMP 25% REDUCT
Repair System Description: LP 50% REDUCT
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

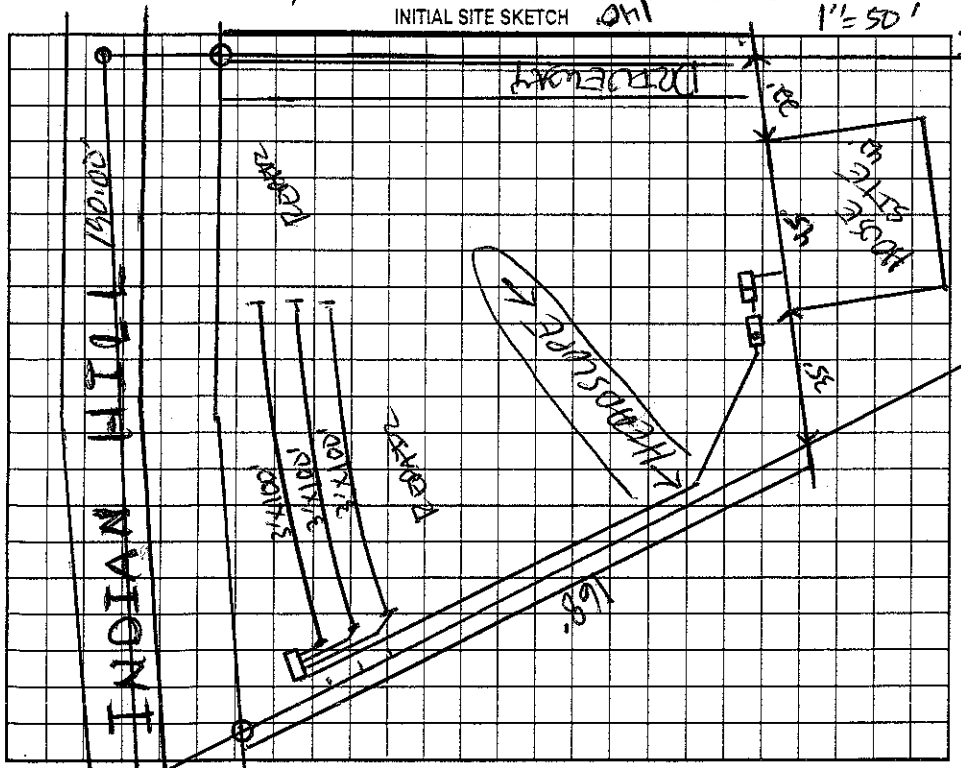
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

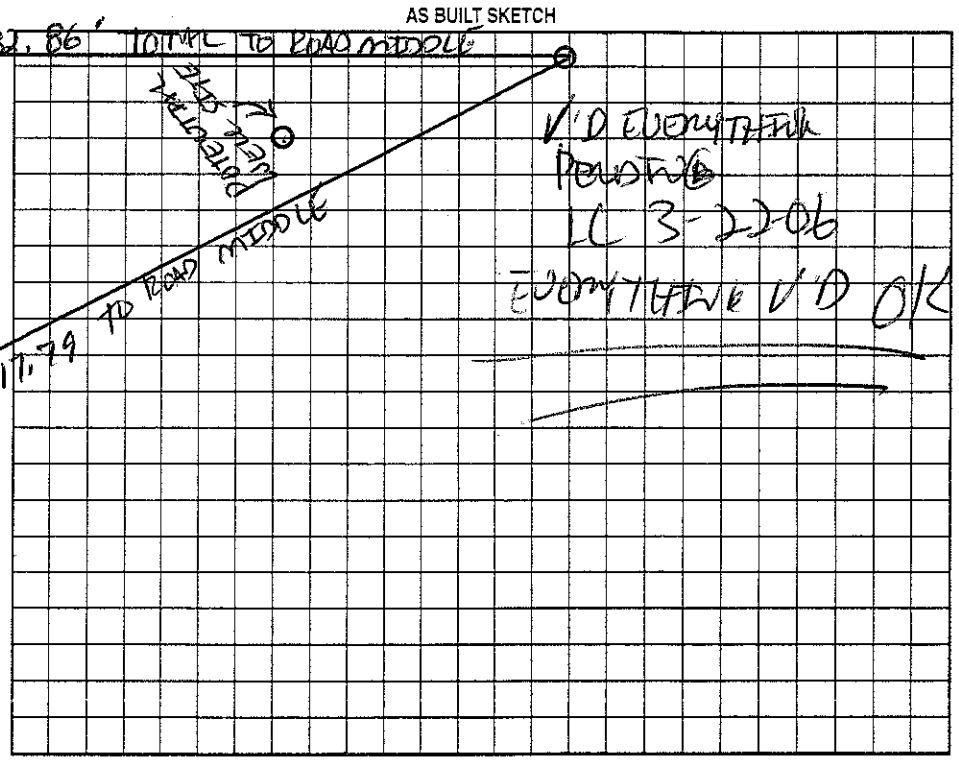
Comments:/Conditions: (1) INSTALL LINES ON CONTOURS (2) MAINTAIN SEPARATIONS (3) CALL PRIOR TO INSTALLATION FOR PUMP SIZING IF NECESSARY

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING TUFFITE FILTER

INITIAL SITE SKETCH 911 1"=50'



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 11-21-05 Installed by: CRAIG THOMPSON

Improvement Permit by: date 11-21-05 Operation Permit by: date 3-22-06

Authorization to Construct by: date 11-21-05 Existing System Inspection by: date

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