# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(C1)

PERMIT# 116292 PIN# ~~4863-34-0172~~ 4863-23-8608 DATE 11-18-03

OWNER OR CONTRACTOR FLEETWOOD HOMES of TROUTMAN PHONE: Business 704-528-7120 Home 704-400-7019

ADDRESS 1040 CHARLOTTE HWY TROUTMAN NC 28166

LOCATION I-77 N, TR NC 901, TL EAGLE MILLS RD; TL TRIVETTE ROAD (1ST), ON LEFT JUST BEFORE MULLIS ROAD.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 4.348 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB 1016 Date 6-8-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet ~~PP~~ 1440 Linear Feet 360
No Lines FIVE 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 PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No

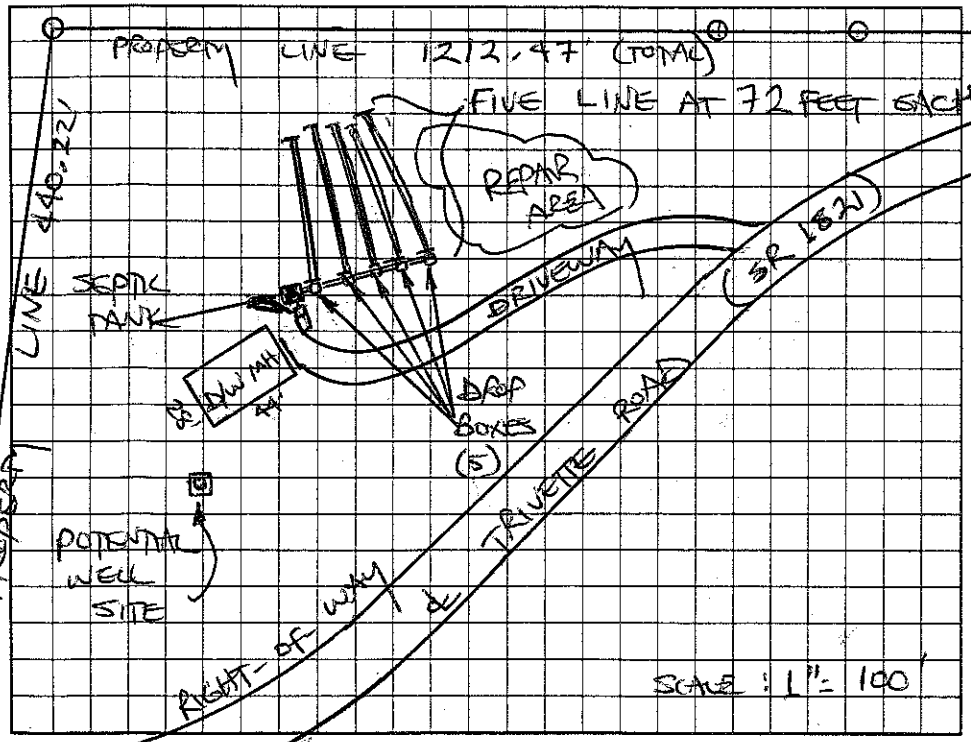
☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

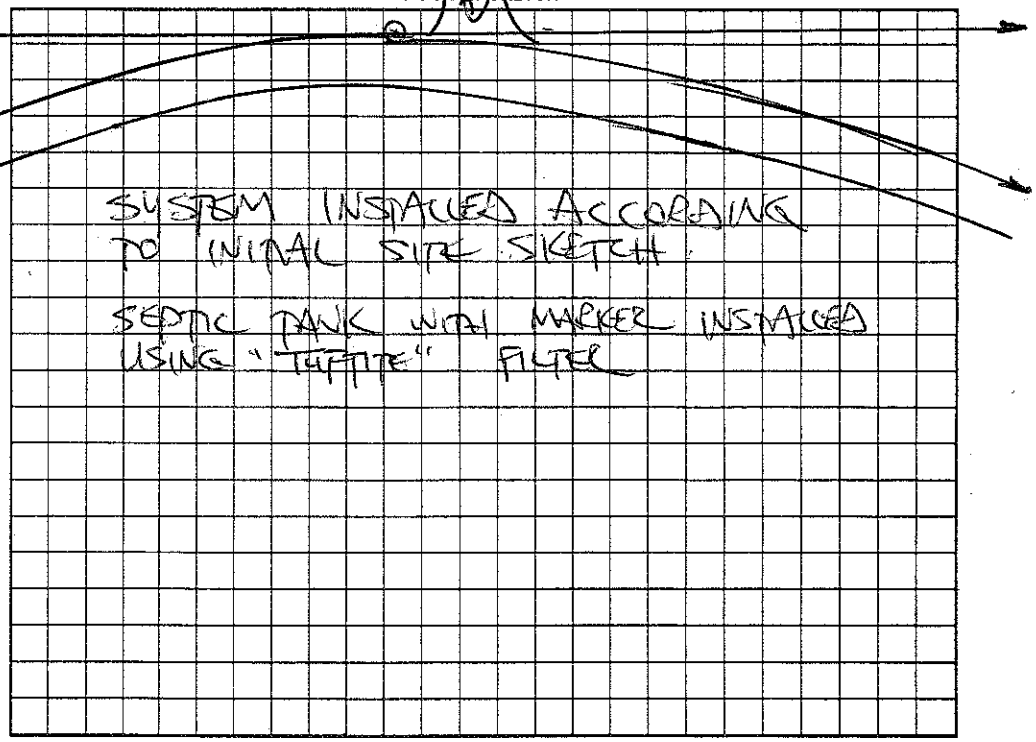
Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions:

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: Cody Davidson date 11-18-03 Installed by: Craig Thompson

Improvement Permit by: STEVE HEARICK date 11-18-03 Operation Permit by: STEVE HEARICK date 11-25-03

Authorization to Construct by: STEVE HEARICK date 11-18-03 Existing System Inspection by: _____ date _____

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