

IREDELL COUNTY HEALTH DEPARTMENT

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

STATESVILLE 704-878-5305

MOORESVILLE 704-664-5281

PERMIT# 132192 PIN# 4637088408 DATE 12-5-05

OWNER OR APPLICANT Traditional Southern Homes PHONE: Business 990-721-5434 Home _____

ADDRESS 8533 Glade Ct Huntersville 28078

LOCATION Hwy 150 W TL quiet core TL Trolling wood on left

SUBDIVISION Spring Acres BLOCK / SECTION _____ LOT 22 LOT AREA .678 AC SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25 gpd/ft²

Septic Tank: <u>1000</u>	Gallons: STB <u>794</u>	Date <u>2-21-06</u>	☒ New System ☐ Repair ☐ Expansion	System Type: <u>I II III IV V VI</u>	☒ House/Mod. Home	No. Bedrooms <u>4</u>	Water Supply:
Pump Tank: _____	Gallons: PT _____	Date _____	System Description: <u>2570 reduction, gravity</u>		☐ Mobile Home	No. Persons _____	☒ Individual
Pump Make: _____	Model _____	Serial No. _____	Repair System Description: <u>LP Panel</u>		☐ Business	No. Employees _____	☐ Public
Nitrification Field: No Fields <u>1</u>	Square Feet <u>1920</u>	Linear Feet <u>480</u>	Maintenance Agreement Required: ☐ Yes ☒ No		☐ Other _____		☐ Community
No Lines <u>4 @ 120'</u>	Trench Width <u>36"</u>	Max Trench Bottom Depth <u>36"</u>	Gravel Depth <u>NA</u>		☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing		

Comments/Conditions:

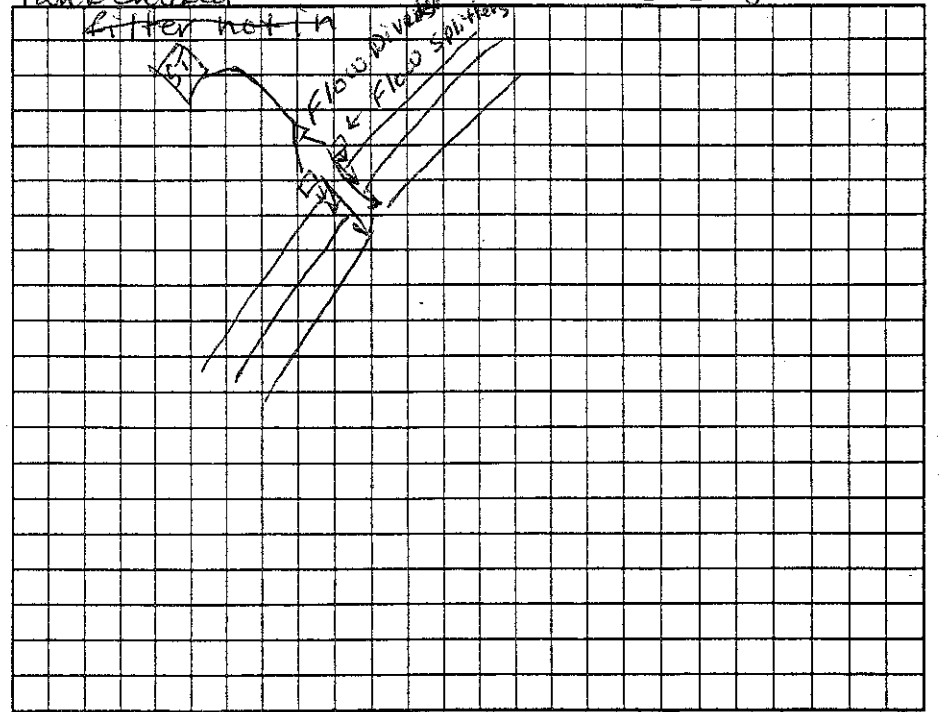
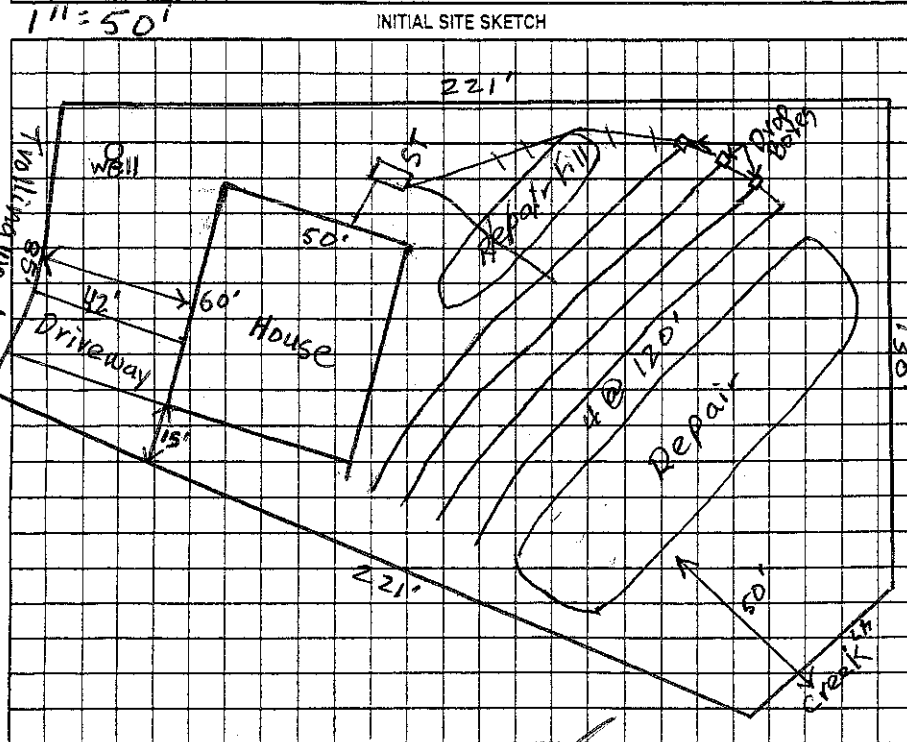
Comments/Conditions:

5-30-06
Due to fill behind house
system changed to gravity panel block
w/ 2 - true flow splitters + flow divider

Tank choked -
fitter not in

AS BUILT SKETCH

6 @ 60'



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: Christopher [Signature] date 12-6-05 Installed by: Gerald Tucker Septic

Improvement Permit by: Judy Merrill date 12-5-05 Operation Permit by: Judy Merrill date 6-6-06

Authorization to Construct by: Judy Merrill date 12-5-05 Existing System Inspection by: _____ date _____

HEALTH DEPT. COPY: WHITE

OWNER COPY (FINAL): YELLOW

OWNER COPY (INITIAL): PINK