This Permit Voids All previous dated Permits

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 87965 PIN# 3774556449 DATE March 20, 2000

OWNER OR CONTRACTOR Charles Moon PHONE: Business _____ Home _____

ADDRESS 127 Briar Field Lane Mooresville, NC

LOCATION 5th. Sharon School Rd ⓛ Stewart Rock past Fulbright past Riverwalk entrance Lot on Left next to Riverwalk sign 526 Stewart Rock

SUBDIVISION Riverwalk BLOCK / SECTION 1 LOT 48 LOT AREA 2.31 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. -3

Septic Tank: 1000 Gallons: STB 1012 Date 1 28 00
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 200
No Lines 4 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth 6"

☑ New System ☐ Repair System Type: I, II, ⓘ IV, V, VI
System Description: Gravity PPBPS
Repair System Description: Same / Engineer Design
Maintenance Agreement Required: ☐ Yes ☑ No
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

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

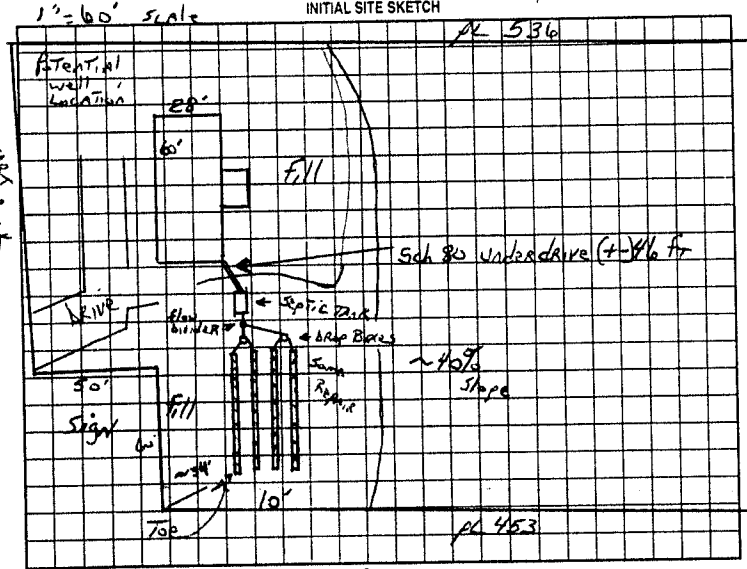
Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments:/Conditions: Install on contour 33 Tons Sand 44 panels (11/56 ft)
Sch 80 pipe To be used under drive
One flow divider, Two Drop Boxes To feed Lines AT same Time
Locate well 100 ft. + MAY possible Distance MAy need speed Levels

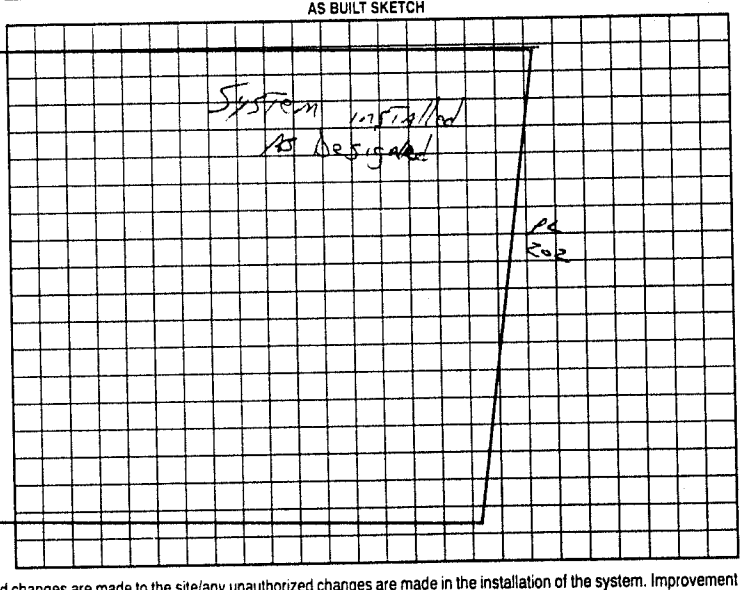
Comments:/Conditions:

1"=60' Scale

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 3-21-00 Installed by: A/B Backhoe

Improvement Permit by: J.C. Potter date March 20 2000 Operation Permit by: J.C. Potter date June 2 2000

Authorization to Construct by: J.C. Potter date March 20 2000 Existing System Inspection by: _____ date _____

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