704-872-1166

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12852 PIN# 3793459312 DATE 5-24-05

OWNER OR CONTRACTOR ~~JOHN CRAVER~~ C/M/TON Homes of Statesville PHONE: Business 704-663-2220 Home 704-534-4700

ADDRESS 80 LAZY LANE MOORESVILLE, NC 28117

LOCATION 40 WEST @ SHARON SCHOOL @ MOLLY HILL CROSS CREEK ON RT LOT 1

SUBDIVISION AUGUSTA GREENS BLOCK / SECTION ____ LOT 1 LOT AREA .863 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 9-11-06
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ=1600 Linear Feet 400'
No Lines 5 x 80' 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: GRAV DISTRIBO
Repair System Description: LP 50'1, REO
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other ____

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

Water Supply:
☐ Individual
☐ Public
☒ Community

Comments:/Conditions: ① GRADE BELOW LOWER ROOF LINE SLIGHTLY SO SURFACE H2O DOES NOT STAND OVER SYSTEM AREA ② INSTALL LINES ON CONTOUR & MAINTAIN SETBACKS.

Comments:/Conditions: Approved 3 BEDROOM 28 x 70' HOUSE PLAN ON 6-2-05. MAINTAIN SETBACKS, Yellow Flag - Septic Tank Marker

INITIAL SITE SKETCH

SEE SITE PLAN SUBMITTED BY MIKE ATHANTAS, LSS

AS BUILT SKETCH

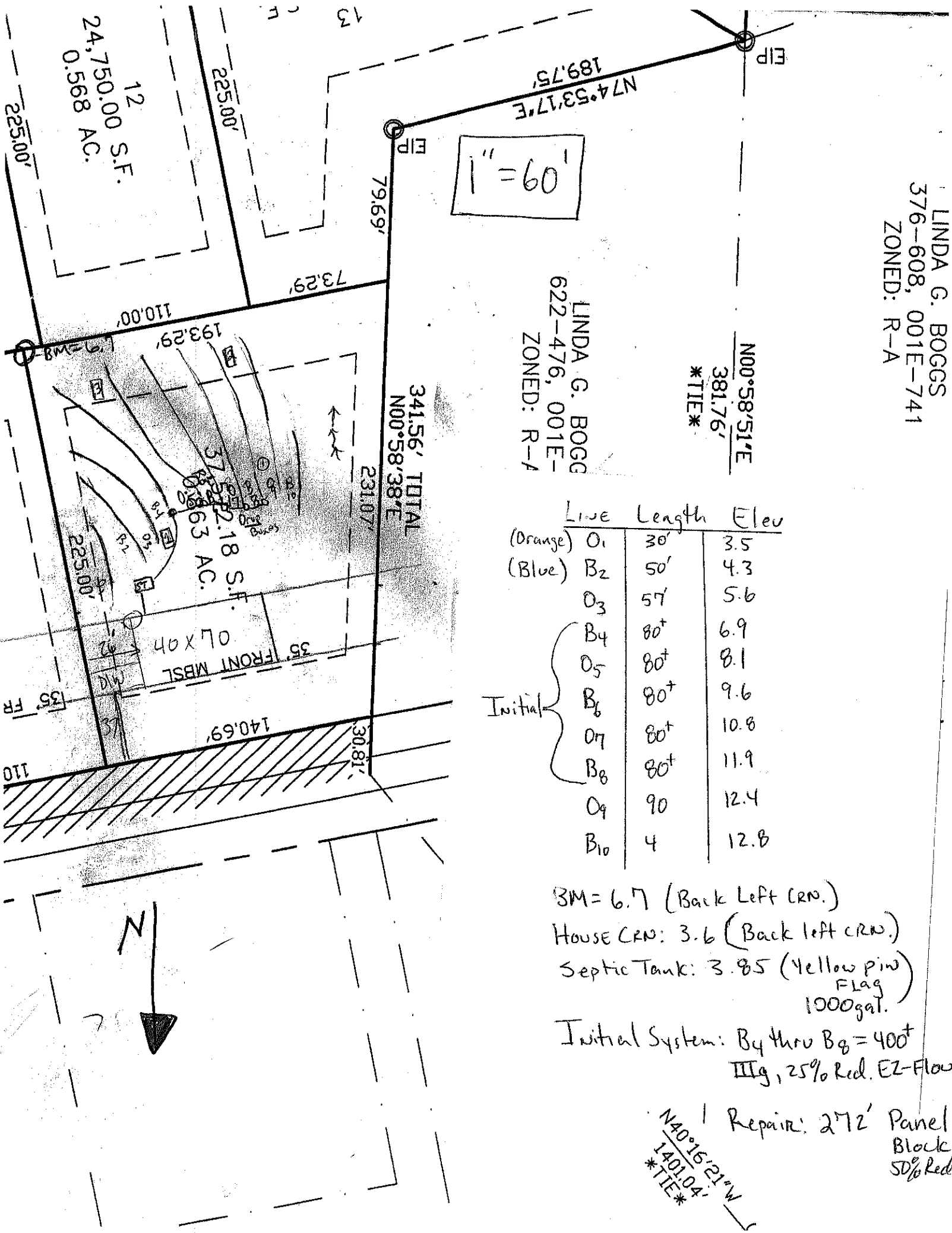
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan 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 5-24-05 Installed by: A-1 Backhoe Inc

Improvement Permit by: ____ date 5-24-05 Operation Permit by: ____ date 3-27-07

Authorization to Construct by: ____ date 6-2-05 Existing System Inspection by: ____ date ____

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



	Line	Length	Elev
(Orange)	O_1	30'	3.5
(Blue)	B_2	50'	4.3
	O_3	57'	5.6
Initial	B_4	80+	6.9
	O_5	80+	8.1
	B_6	80+	9.6
	O_7	80+	10.8
	B_8	80+	11.9
	O_9	90	12.4
	B_{10}	4	12.8

BM = 6.7 (Back Left Crn.)
House Crn: 3.6 (Back left crn.)
Septic Tank: 3.85 (Yellow pin Flag)
1000 gal.
Initial System: B_4 thru B_8 = 400+
IIIg, 25% Red. EZ-Flow
Repair: 272' Panel
Block
50% Red.