IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 110191 PIN# 3797-73-9159 DATE 12-6-02

OWNER OR CONTRACTOR FLEETWOOD HOMES PHONE: Business 704-872-0059 Home

ADDRESS 1270 NORTHSIDE DRIVE, STATESVILLE, NC 28625

LOCATION NC 90 WEST, TR MIDWAY ROAD, TL HALYBURTON ROAD, ~1250 FEET ON RIGHT

SUBDIVISION HALY BROOK BLOCK / SECTION 1 LOT 15 LOT AREA 0.57 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.20 GPD/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 5-28-02
Pump Tank: 1000 Gallons: PT 17 Date 7-22-02
Pump Make: Myers Model MW50-1/2 Serial No. 260880901
Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 300
No Lines FOUR Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth SAND 6"

☑ New System ☐ Repair System Type: I. II. III. IV. V. VI
System Description: LOW PRESSURE, 50% REDUCTION
Repair System Description: LOW PRESSURE, 50% REDUCTION
Maintenance Agreement Required: ☑ Yes ☐ No

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

Water Supply: ☐ Individual ☑ Public ☐ Community

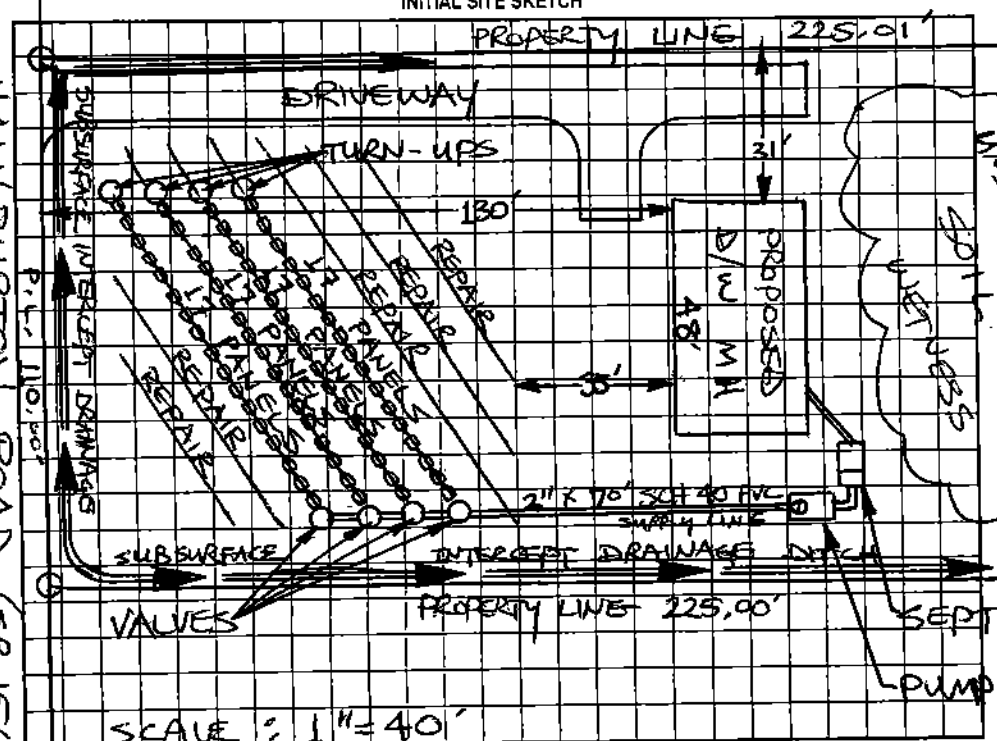
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: ① KEEP WATER LINE MINIMUM 10 FEET FROM SYSTEM ② INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 48" DEEP ③ SEE ATTACHED SHEETS FOR PUMP AND LOW PRESSURE DISTRIBUTION

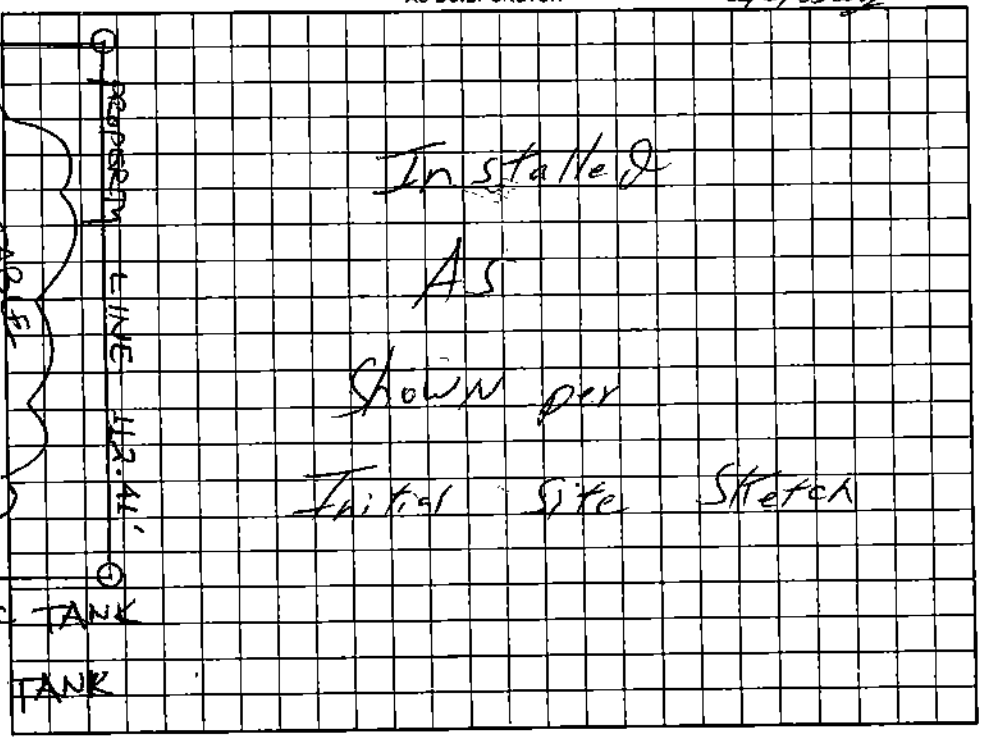
Comments/Conditions: ④ A CONTRACT SHALL BE EXECUTED WITH A MANAGEMENT ENTITY PRIOR TO ISSUANCE OF OPERATION PERMIT

- ST Master Installed, Tuff Tite Filter Installed, Pressure Check-okay 2/5/03 mc

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 1/27/03 Installed by: Craig Thompson

Improvement Permit by: STEVE HEDRICK date 12-6-02 Operation Permit by: William O. Johnson date 3/7/03

Authorization to Construct by: STEVE HEDRICK date 12-6-02 Existing System Inspection by: _____ date _____

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