# IREDELL COUNTY HEALTH DEPARTMENT

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

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

Paid 50.00 (Wright - 704-852-1763)

PERMIT# 25068 PIN# 2D 1A 206 DATE 3/7/02

OWNER OR CONTRACTOR Jason Howard PHONE: Business Home 704-502-1463

ADDRESS 172 Edsel St. Mooresville, NC. 28117

LOCATION 1100 TR Stonemarker Rd. straight to 3rd on (L) past CLEMATIS Pl

SUBDIVISION Stonemarker BLOCK/SECTION 3 LOT 2,8 LOT AREA .9Ac SITE CLASS. RS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model 798 Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet 400

No Lines Trench Width 3' Max Trench Bottom Depth 32" Gravel Depth No

X New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: ~~E-2 Pump B-Line Contour~~ 16" PPB RS

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

X House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2.5

☐ Business No. Employees

☐ Other

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

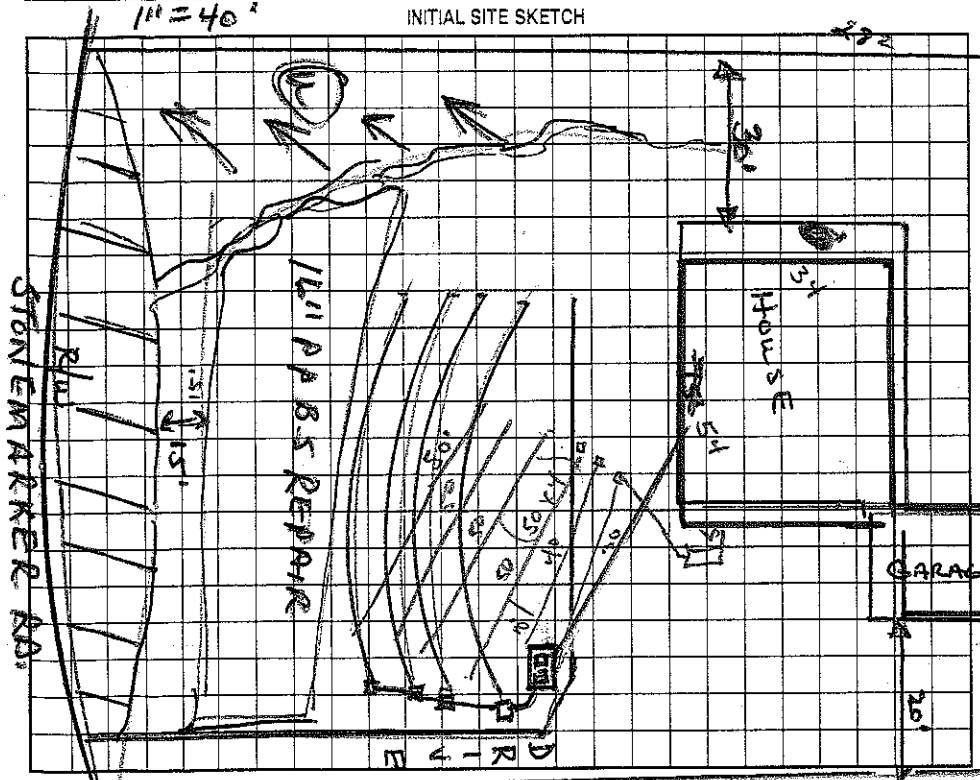
Water Supply: X Individual ☐ Public ☐ Community

Comments/Conditions: X This is 25% reduced system
House not to be less than 130' from road R/W
Ferrous sleeve required under driveway area

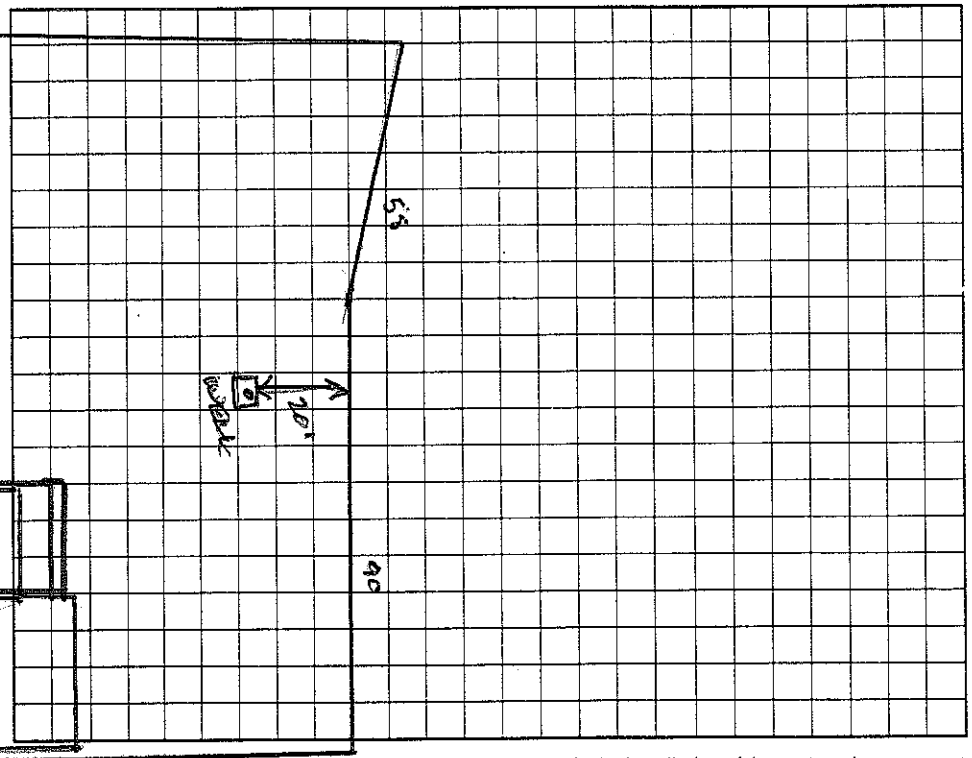
Comments/Conditions: 2bdrm
16" PPBRS
4@ 67'+3"

1" = 40'

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 4/23/02 Installed by:

Improvement Permit by: Wesley Sparks RS. date 3/7/02 Operation Permit by: date

Authorization to Construct by: Wesley Sparks RS. date 3/7/02 Existing System Inspection by: date

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