IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 105433 PIN# ~~4624275905, 961~~ 4624-29-5072 LK Norman DATE 5/8/02

OWNER OR CONTRACTOR POINT ON NORMAN / LK Norman Signature PHONE: Business 660-1185 Hm. 799-1851

ADDRESS 2214 BRAWLEY SCHOOL RD - MOORESVILLE NC 28115 5824 Brawley School

LOCATION BRAWLEY SCHOOL - TR 2nd MANSFIELD - TL BROCKTON - TR DEDHAM - 3RD ON RT

SUBDIVISION POINT BLOCK / SECTION 9 LOT 961 LOT AREA 1.19AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .25 good/left 2

Septic Tank: 1000+ Gallons; STB 338 Date 4/5/05

Pump Tank: 1000+ Gallons; PT 27 Date 4/6/05

Pump Make: Goulds Model WE05524HU Serial No. E048036

Nitrification Field: No Fields 1 Square Feet 640 Linear Feet 320

No Lines 4@80' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I. II. III. IV. V. VI

System Description: LP PANEL

Repair System Description: LP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees

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

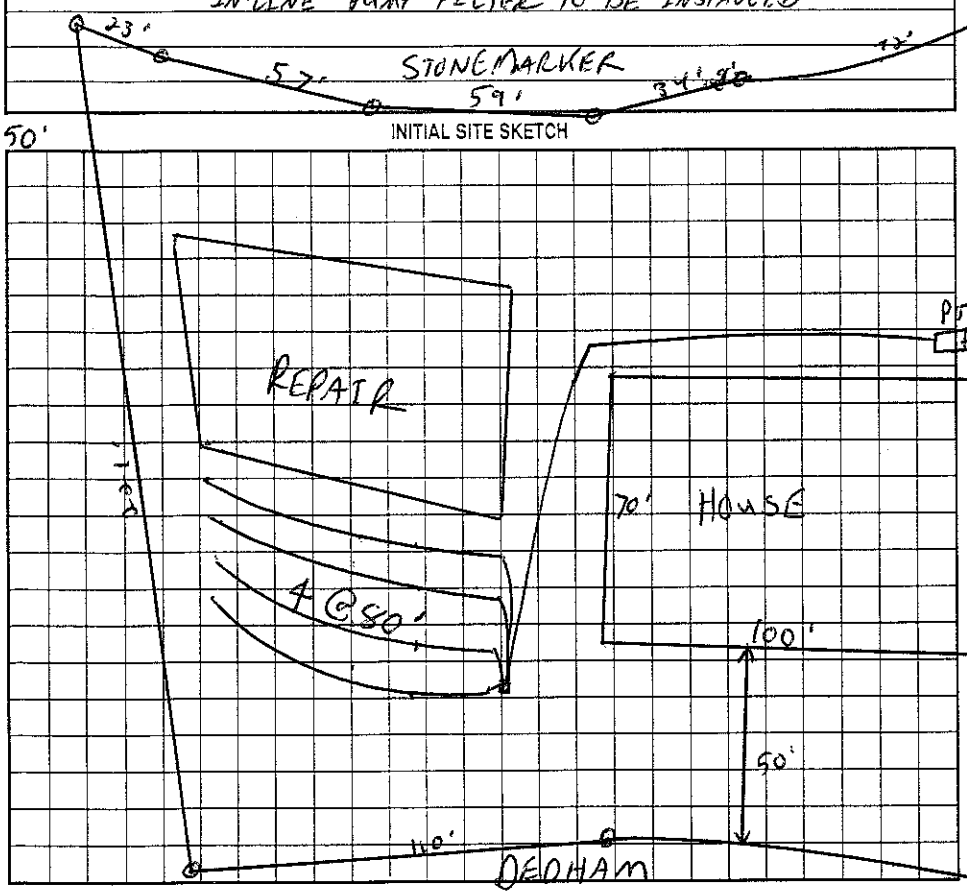
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments/Conditions: IN-LINE PUMP FILTER TO BE INSTALLED

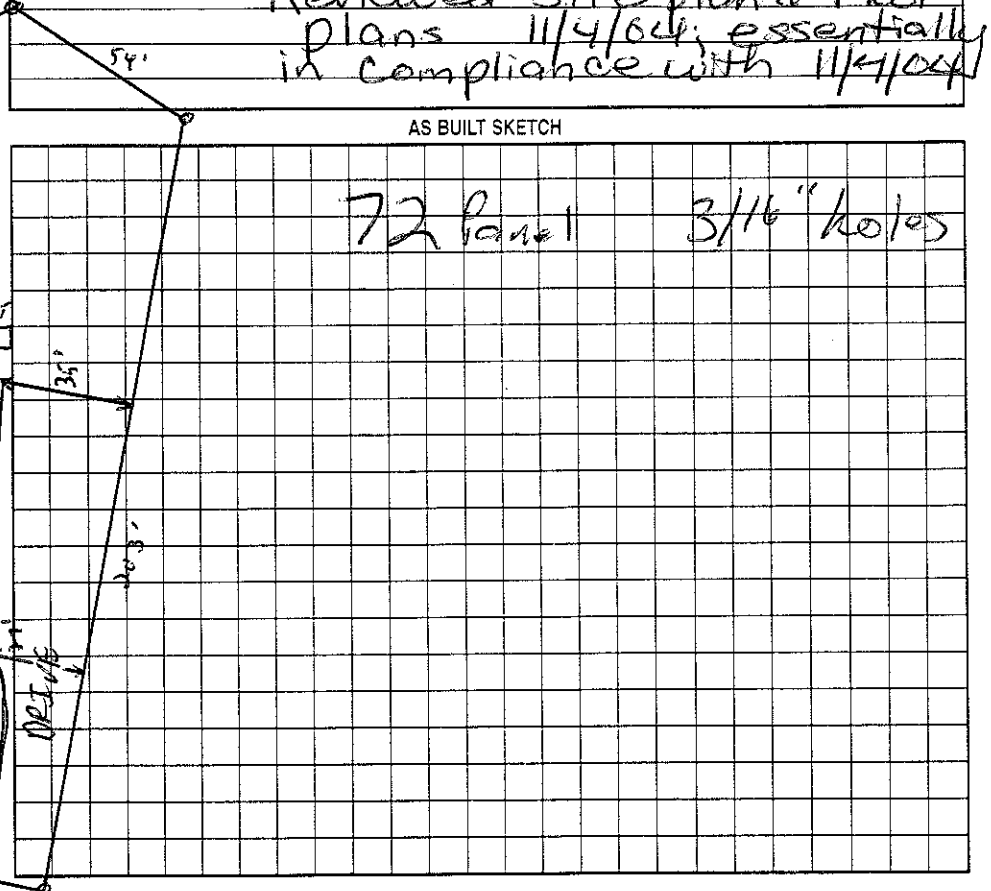
Comments/Conditions: Reviewed Site plan & Floor Plans 11/4/04; essentially in compliance with 11/4/04

INITIAL SITE SKETCH

1"=50'



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 5-22-02 Installed by: Hallman Const.

Improvement Permit by: _____ RS date 5/8/02 Operation Permit by: _____ RS date 7/12/05

Authorization to Construct by: _____ RS date 11/4/04 Existing System Inspection by: _____ date _____

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