IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 109541 PIN# 4624275705 4624-59-0173 (Chris) DATE 3-21-06

OWNER OR APPLICANT David Dibble Custom Homes PHONE: Business 799-1688 Home

ADDRESS P.O. Box 4717 Mooresville NC 28117

LOCATION Brawley School Rd TL Torrence Chapel TL Shelburne TL Cape Cod on left

SUBDIVISION The Point BLOCK / SECTION 11 LOT 152 LOT AREA 51,896 ft² SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 338 Date 11/27/07

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480

No Lines 6@80' Trench Width 36" Max Trench Bottom Depth 36"

Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: ☐ II ☐ III ☐ IV ☐ V ☐ VI

System Description: Gravity - 25% Reduction

Repair System Description: Pump - 25%-50% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 4 No. Persons No. Employees

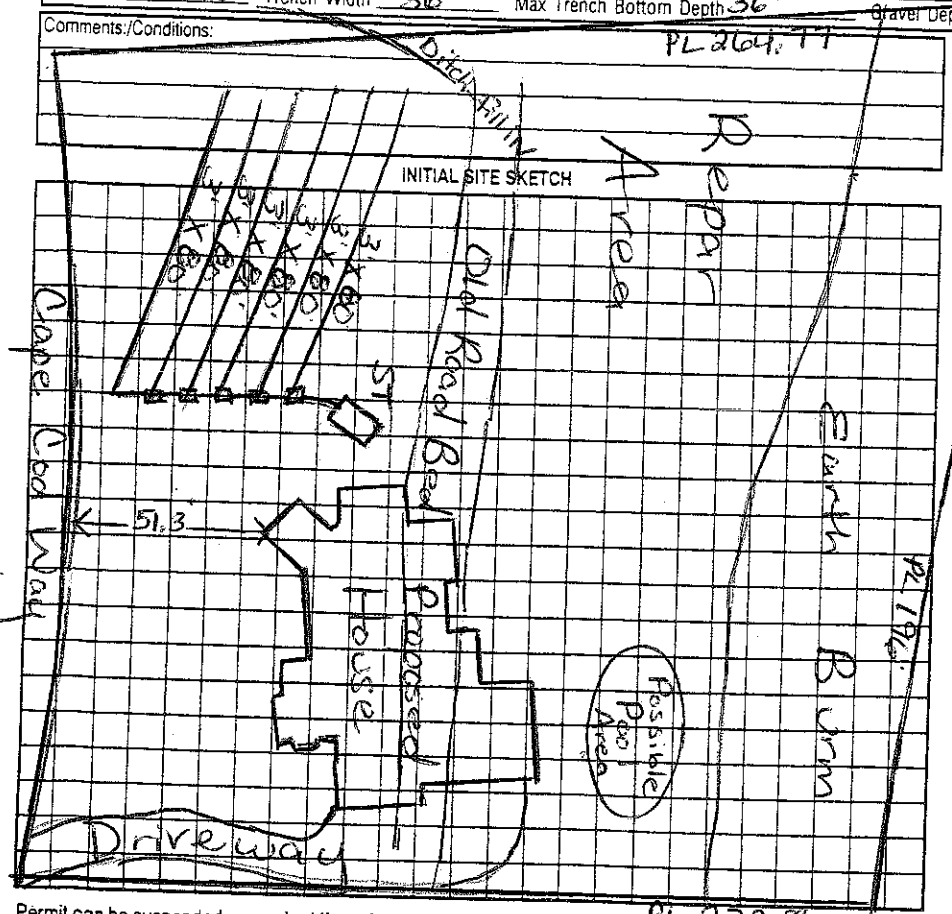
Water Supply: ☐ Individual ☒ Public ☒ Community

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

Comments:/Conditions:

PL 264.77

INITIAL SITE SKETCH



Comments:/Conditions:

PL 413

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: Crystal Dees date 3/23/06 Installed by: Orbison & Sons

Improvement Permit by: Mark H. Dotson RS date 3/21/06 Operation Permit by: Wesley Sparks RS date 4/14/08

Authorization to Construct by: Wesley Sparks RS date 4/4/07 Existing System Inspection by: date

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