IREDELL COUNTY HEALTH DEPARTMENT

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

195,00 Paid 2170 11 80

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

PERMIT# 106247 PIN# 4625 09 4675 DATE 6/18/03

OWNER OR CONTRACTOR Kelly Bldg. + Development PHONE: Business 704-664-9222 Home

ADDRESS PO Box 3051 Mooresville, NC 28117

LOCATION Corner of Delaney Ln. and Barber Loop

SUBDIVISION CL+T BLOCK / SECTION 7 LOT 119C LOT AREA .87 AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 8-30-03
Pump Tank: 1000 Gallons; PT 283 Date 8-29-03
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 536 ~~540~~ Linear Feet 268 ~~270~~
No Lines 4@67' Trench Width 2-3' Max Trench Bottom Depth 36" Gravel Depth No

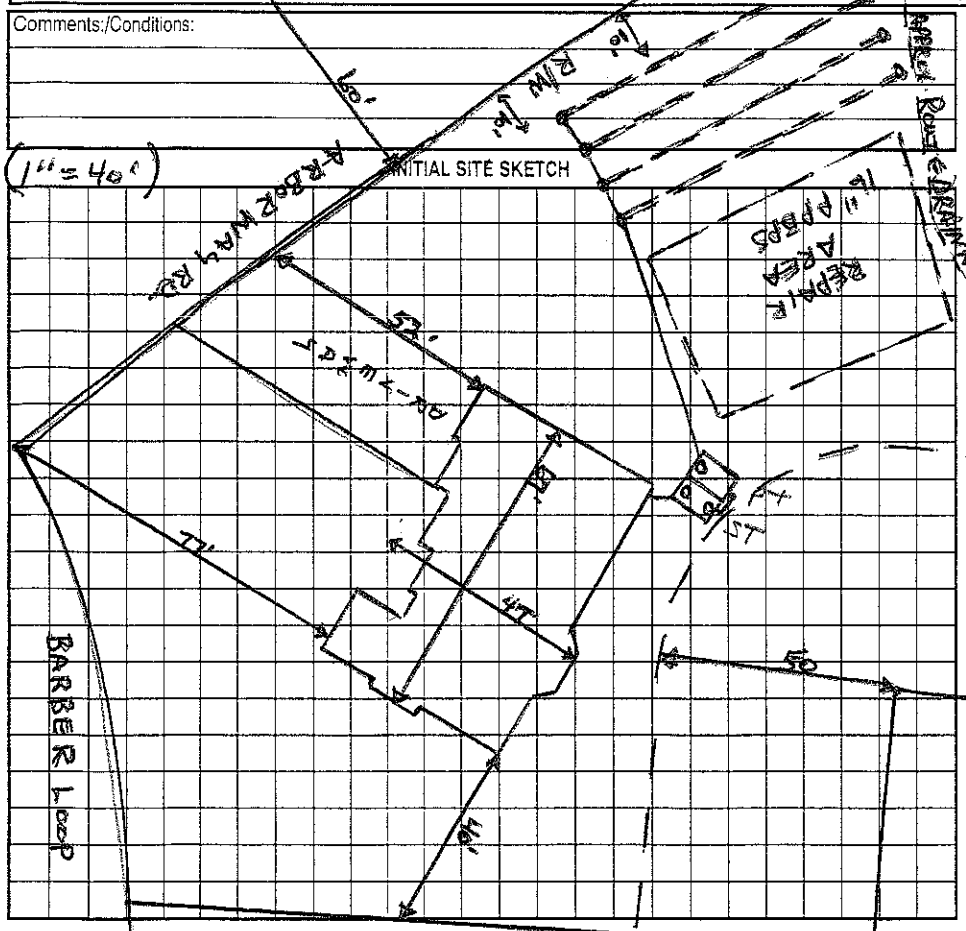
[X] New System [ ] Repair System Type: I, II, III, (IV) V, VI
System Description: Plus Dosed - 16" PP3RS
Repair System Description: 16" PP3PS
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Bathrooms 3.5
[ ] Business No. Employees
[ ] Other
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

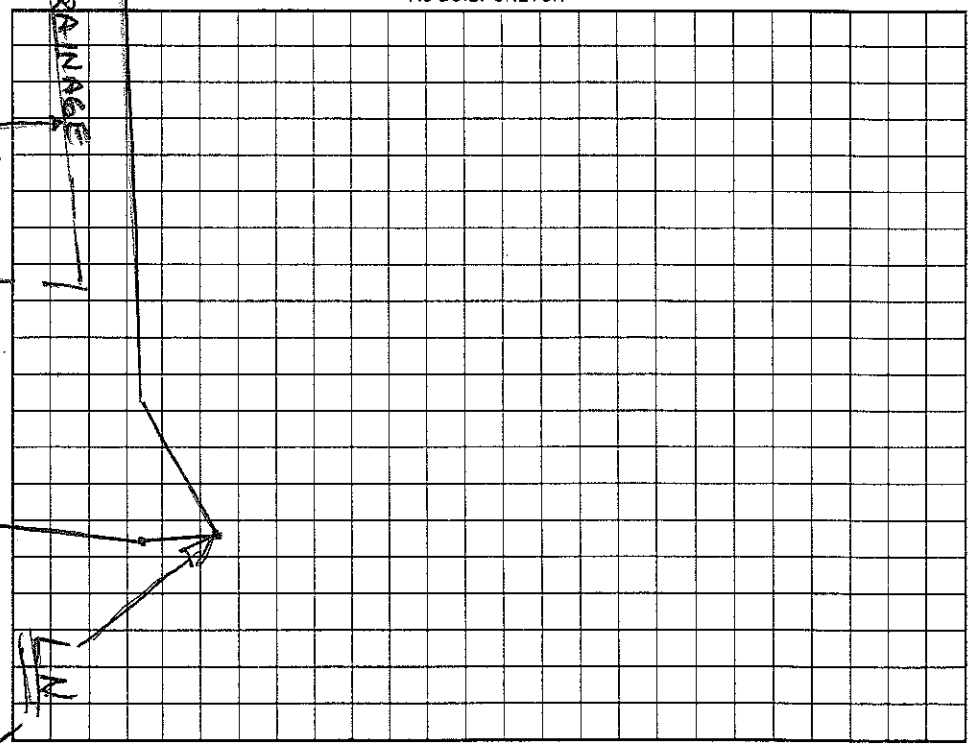
Comments:/Conditions:

INITIAL SITE SKETCH (1" = 40')



Comments:/Conditions: Tanks checked 10-2-03
Installed Panel lines as shown 10/3/03
3/16" hole drilled.

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.

* Matthew B Kelly date 6/19/03 Installed by: R & H

Permit by: Wesley Sparks R.S. date 6/18/03 Operation Permit by: Maina H Dalsan R.S. date 4/27/04

to Construct by: Wesley Sparks R.S. date 6/18/03 Existing System Inspection by: date

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