113271

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 024391 PIN# pt of 2CA3 4625-29-8063 DATE 5/19/03

OWNER OR CONTRACTOR GREG FISHER PHONE: Business 502-3711 Home

ADDRESS PO BOX 3302 MOORESVILLE NC 28117

LOCATION BRAWLEY SCHOOL - TR BAY HARBOUR - TR WINDY RUN AT END

SUBDIVISION HARBOUR BLOCK / SECTION 5 LOT 56 LOT AREA 30,000 ft² SITE CLASS PS DESIGN FLOW 450GPD L.T.A.R. .3GPD/FT²

Septic Tank: 1000 Gallons; STB 312 Date 10/17/03
Pump Tank: 1000 Gallons; PT 283 Date 11/3/04
Pump Make: MYERS Model NEO 712 HC Serial No. L037357
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: PUMP 25% REDUCTION
Repair System Description: CP PANEL
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

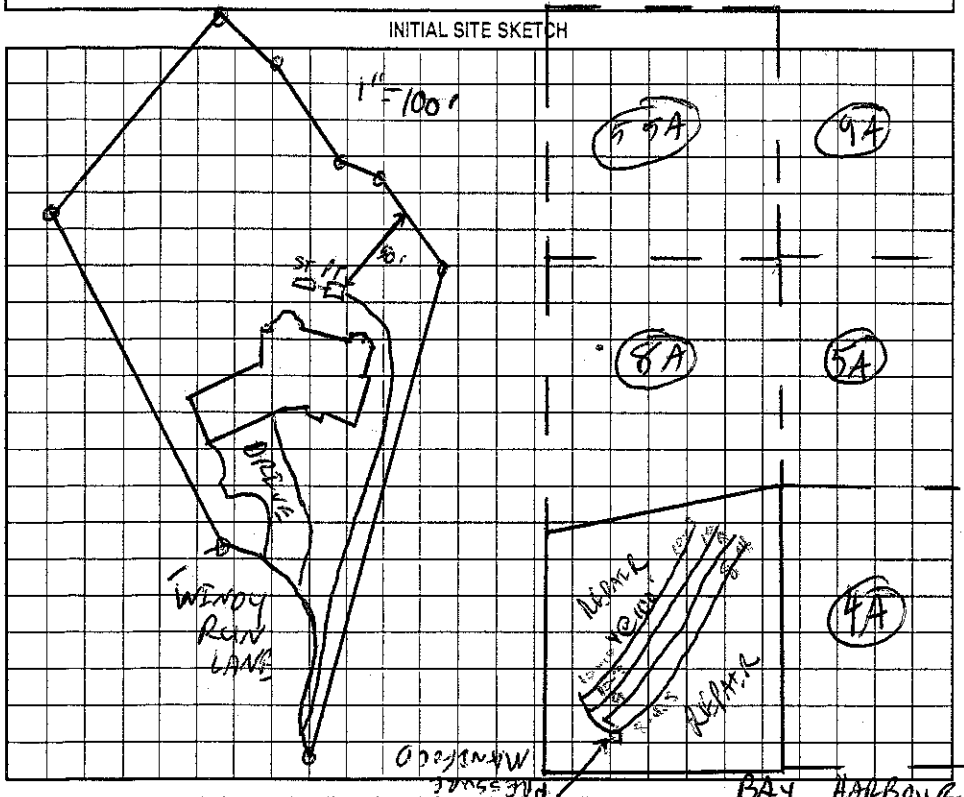
Water Supply: ☐ Individual ☐ Public ☑ Community

Comments:/Conditions:

1"=100'

Comments:/Conditions: EZ FLOW INSTALLED OFFSITE

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: [signature] date 5/20/03 Installed by: Ordonson + Sons

Improvement Permit by: C. [signature] KS date 5/19/03 Operation Permit by: Wesley Sparks R.S. date 2/19/04

Authorization to Construct by: C. [signature] KS date 5/19/03 Existing System Inspection by: date

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