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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 11991 PIN# 4625-88-4937.312 4625-81-5730 DATE April 23, 2004

OWNER OR CONTRACTOR CRI, The Point on Norman Lake Dave Dodd Custom PHONE: Business _____ Home _____

ADDRESS 2214 Brawley School Rd. Mooresville N.C. 28117

LOCATION Brawley School Rd. TL Yacht Rd TL Milford Circle 3rd lot on Right

SUBDIVISION The Point BLOCK / SECTION 13 LOT 1312 LOT AREA 37,530 ft² SITE CLASS. PS DESIGN FLOW 460gpd L.T.A.R. .03

Septic Tank: ~~1000~~ 1500 Gallons; STB 325 Date 2/6/06

Pump Tank: 1000 Gallons; PT 169 Date 7/9/05

Pump Make: Gould's Model WE0512HO Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: pressure 25% Reduction

Repair System Description: LPP 25-50% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No initially

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees _____

☐ Other _____

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

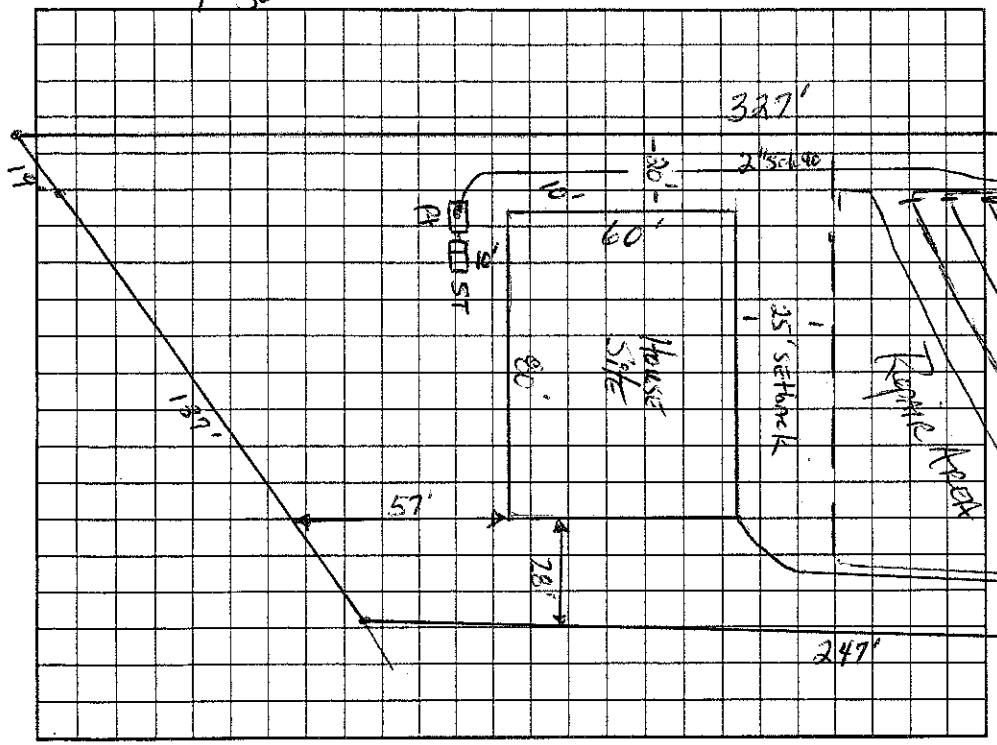
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions:

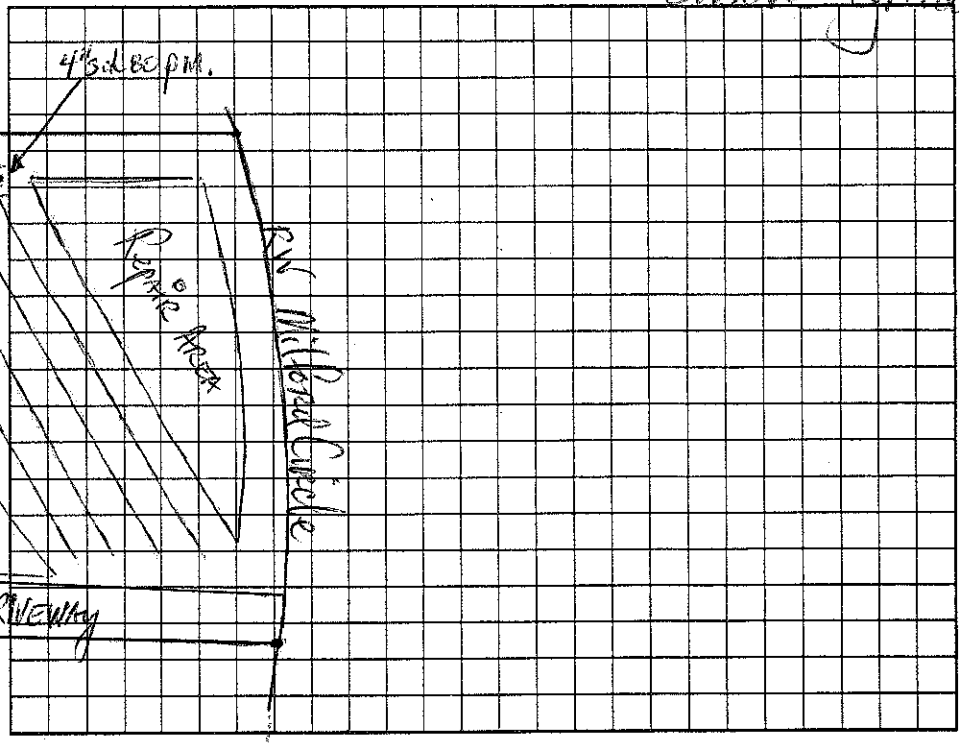
Comments:/Conditions: 3/15/06 PM - IQUW INSTALLED - AMS

Note: PT riser needs to be 6 inches above grade

1"=50' 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 6-22-04 Installed by: Ordinance Dodson RS

Improvement Permit by: Hoffman, RS date 4-23-04 Operation Permit by: Mark H Dodson date 4/28/06

Authorization to Construct by: Wesley Sparks RS date 7/27/05 Existing System Inspection by: _____ date _____

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