4626278162

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 118705/118705 PIN# 4626 38 4001.342 DATE 6/21/04

OWNER OR CONTRACTOR THE FARMS LLC / Arcadia PHONE: Business 660-1185 Home

ADDRESS 2214 BRAWLEY SCHOOL - MOORESVILLE NC 28115

LOCATION BRAWLEY SCHOOL - TR McKENDREE - TL KEMP - TR ALDER SPRINGS - TL BAYBERRY - ON RT CORNER OF LOT AND GRASS

SUBDIVISION FARMS BLOCK / SECTION 3 LOT 342 LOT AREA 1.58AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. 1.25-50/1.5

Septic Tank: 1000 Gallons; STB 338 Date 7-23-05

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: GRAVITY 25% REDUCTION

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

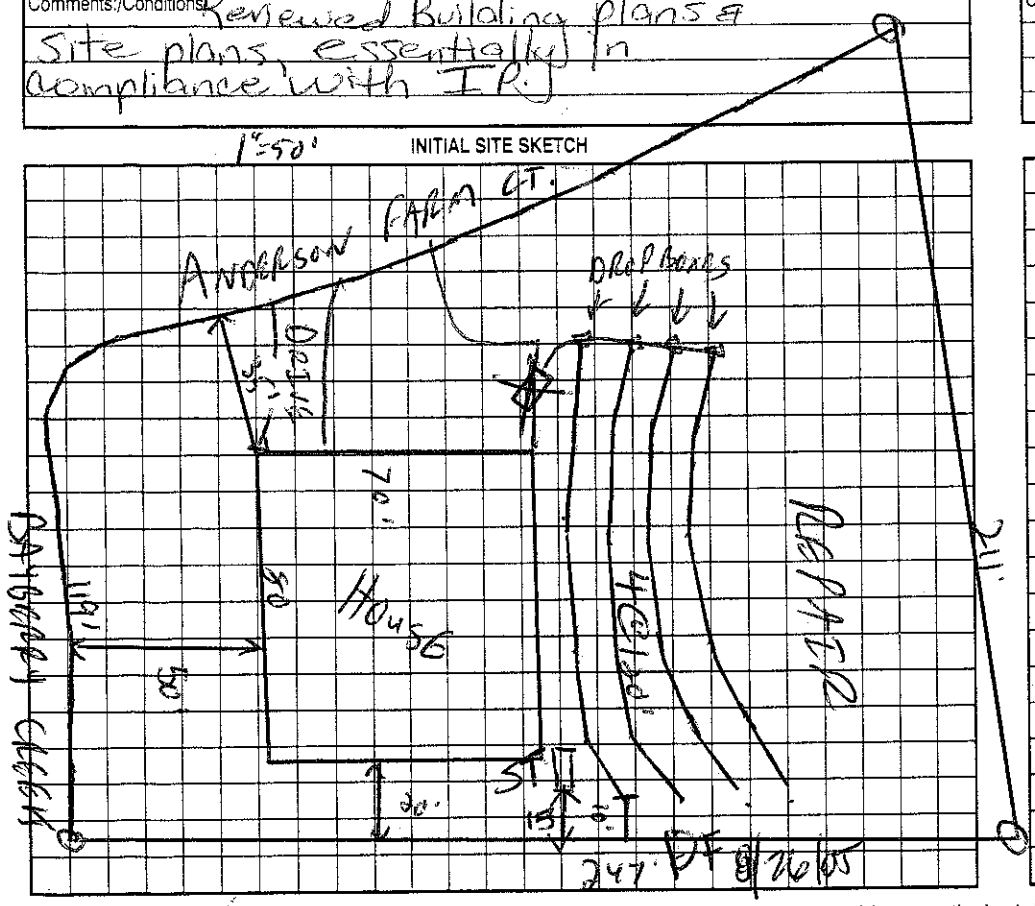
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

Comments/Conditions: Reviewed Building plans & site plans, essentially in compliance with I.P.

Comments/Conditions: Checked lines & tank Grav. - EZ Flow, essentially as drawn.

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 7-12-04

Improvement Permit by: date 6/21/04

Authorization to Construct by: RS date 4-7-05

Installed by: RS

Operation Permit by: RS date 8/26/05

Existing System Inspection by: date

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