...L COUNTY HEALTH DEPARTMENT

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

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

119636 PIN# ~~4625505104.433~~ 4625289806.000 DATE 1/25/05

OWNER OR CONTRACTOR THE FARMS LLC / J.S. Testa PHONE: Business ____ Home ____

ADDRESS 3214 BRAWLEY SCHOOL RD MOORESVILLE NC 28115 Temp - TRAILER SPRGS.

LOCATION BRAWLEY SCHOOL - TR MCGENDREE - ~~DUNHAMTON~~ TR BAYBERRY CREEK CIRCLE ON RT

SUBDIVISION THE FARMS BLOCK / SECTION 3 LOT 433 LOT AREA .96AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .3600/FT

Septic Tank: 1000 Gallons: STB 444 Date 3-6-06

Pump Tank: 1000 Gallons: PT 27 Date 3-13-06

Pump Make: Goulds Model WE03512MU 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 ____

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

System Description: Pump 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

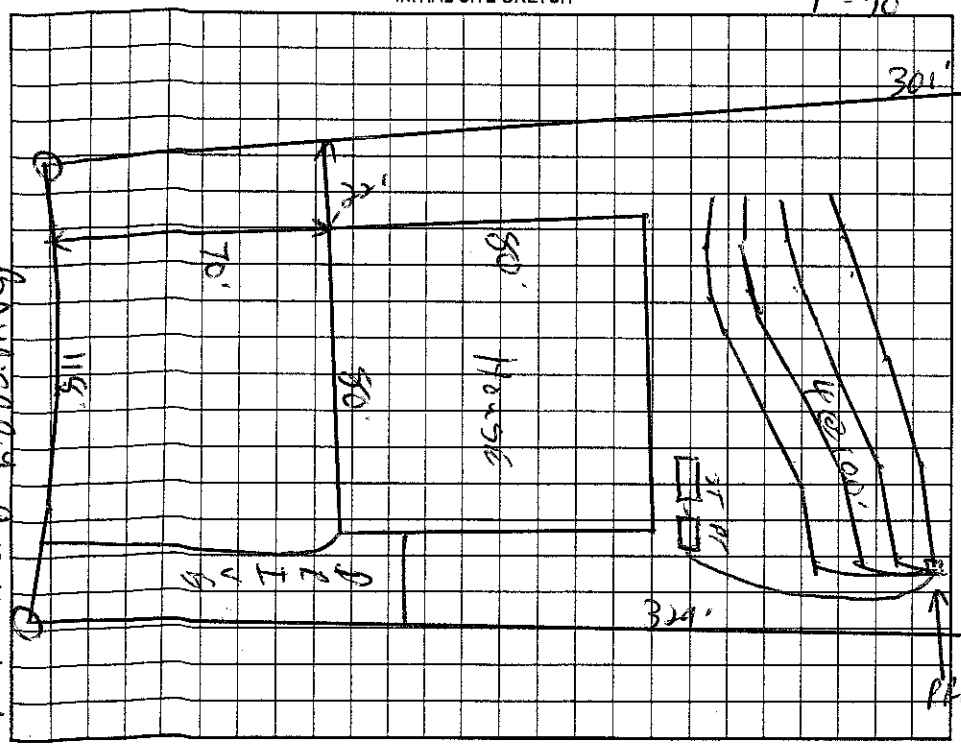
1/3 KP

Comments:/Conditions: DO NOT ~~EXCEED~~ CUT HOUSE PAD

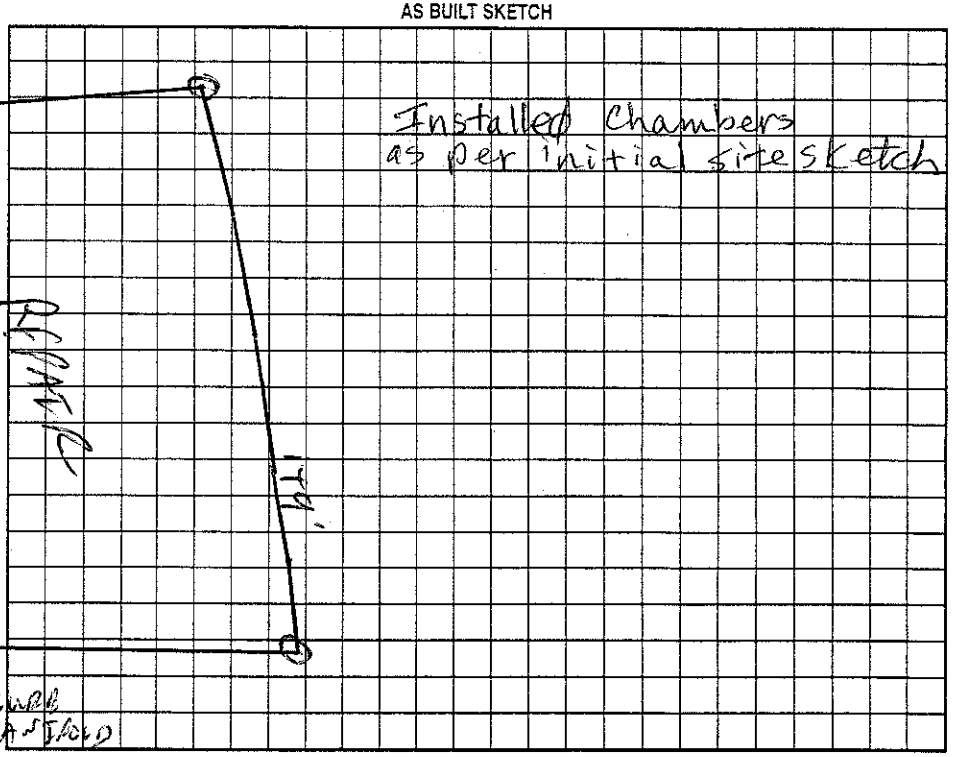
Renewed Building & site plans, in Compliance with original permit.

Comments:/Conditions:

INITIAL SITE SKETCH 1"=50'



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 2-24-05 Installed by: Wayne Orbison

Improvement Permit by: ____ date 1/25/05 Operation Permit by: Judy Melvill date 4-10-06

Authorization to Construct by: ____ date 11/1/05 Existing System Inspection by: ____ date ____

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