3:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 149609 PIN# 4626 30 3375 DATE 10/14/08

OWNER OR APPLICANT CHRIS BARG PHONE: Business 704-400-8403 Home

ADDRESS 253 PATTERNOTE RD. MOORESVILLE, NC. 28117

LOCATION 122 CADES COVE LN.

SUBDIVISION HARBOUR BLOCK / SECTION 6 LOT 8 LOT AREA .92AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 338 Date 1-12-09
Pump Tank: 1000 Gallons; PT 283 Date 2-5-09
Pump Make Ecoflo Model WE03/2MH Serial No 50655758
Nitrification Field: No Fields 1 Square Feet 542 Linear Feet 271
No Lines 3 Trench Width 2' Max Trench Bottom Depth 3

[X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI
System Description: LP- 16" PABPS
Repair System Description: SAME TYPE
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Persons
[ ] Business No. Employees
[ ] Other

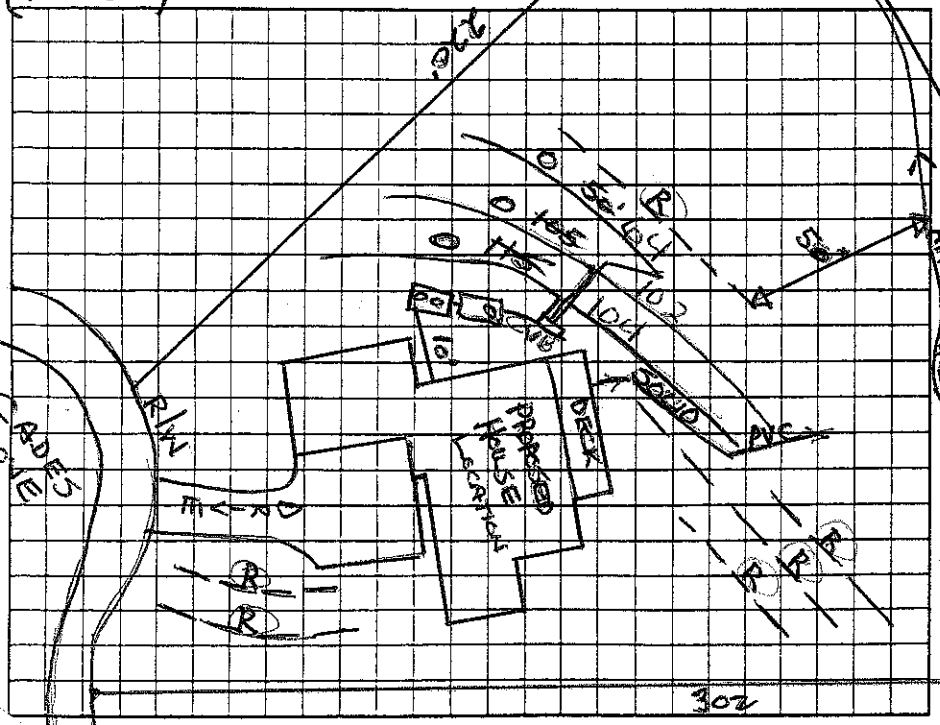
Water Supply: [ ] Individual [ ] Public [X] Community

Gravel Depth NA [ ] Gravity [X] Pressure [ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

Comments:/Conditions:

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5/19/09 Checked pressure 25# set
elect & alarm

INITIAL SITE SKETCH (1" = 50')



AS BUILT SKETCH

Informed Home Owner that placing mulch over drainfield (was) not good idea & could cause premature failure.

It 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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

n plat valid without expiration [ ] Improvement Permit with site plan valid for sixty months [X]

Frances McKelly date 9/14/08

Wesley Sparks RS. date 10/14/08

struct by: Wesley Sparks RS. date 10/14/08

Installed by: Richard Hartsoe date 5/18/09

Operation Permit by: Maria Hartsoe RS date 5/18/09

Existing System Inspection by: date

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