750.00 Paid

IREDELL COUNTY HEALTH DEPARTMENT

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

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

4626377801

DATE 1-11-06

PERMIT# 118610 PIN# 4626 38 4001 PHONE: Business 704-896-5766 Home 704-361-5440 mobile

OWNER OR APPLICANT David S. Rushing

ADDRESS 221 Beracah Rd Mooresville 28115

LOCATION Brawley School Rd TR McKendree TL Kemp TR Alder Springs on right

SUBDIVISION The Farms BLOCK / SECTION Ph. 3 LOT 322 LOT AREA .85 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3gpd/ft², .25 Repair

Septic Tank: 1000 Gallons: STB 338 Date 5-19-07

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

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

No Lines 5 @ 80' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% reduction, gravity

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons No. Employees

Water Supply: ☐ Individual ☐ Public ☒ Community

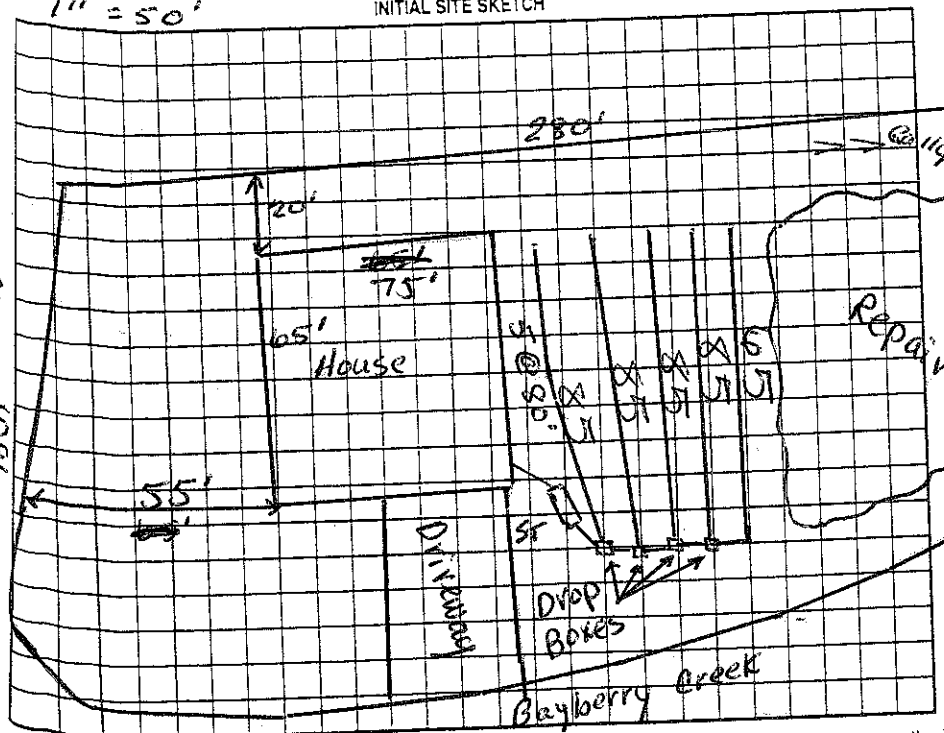
Gravel Depth NA ☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: 12/3/07 Talked with Installer, Okay to vary line lengths.

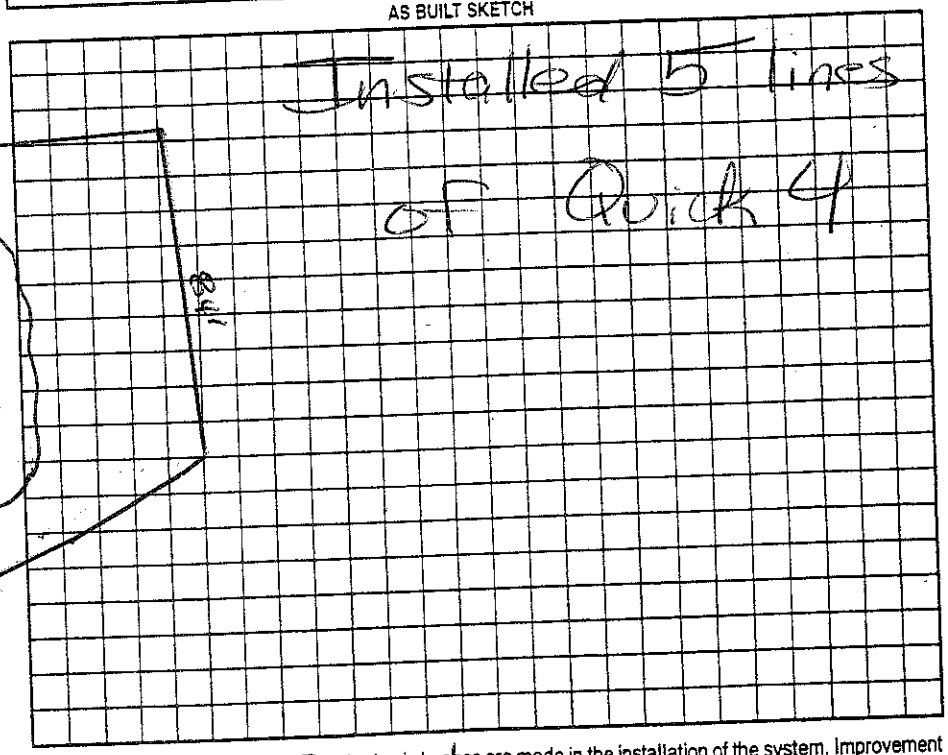
Comments:/Conditions:

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: D Rushing date 1-13-06

Improvement Permit by: Judy McNiell date 1-11-06

Authorization to Construct by: Wendy Sparks RS date 4/10/07

Installed by: R&L RS date 12/4/07

Operation Permit by: Mana date

Existing System Inspection by: date

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