D-1032

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 092448 PIN# ~~4626 38 7480 PT~~ 4626-39-3276 DATE 9-25-00

OWNER OR CONTRACTOR EASTER DEVELOP CORP / Lewis Carpenter PHONE: Business 664-2906 Home

ADDRESS 227 Hideaway Ln Mooresville NC 28117

LOCATION Brawley School R McKendree on Rt - corner of Armour

SUBDIVISION Blackberry Creek BLOCK / SECTION II LOT 9 LOT AREA .71 acre SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 3040/1052

Septic Tank: 1000 Gallons; STB 312 Date 9/1/62

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3@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: GRAVITY PANEL

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees

☐ Other

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

Water Supply: ☒ Individual ☐ Public ☐ Community

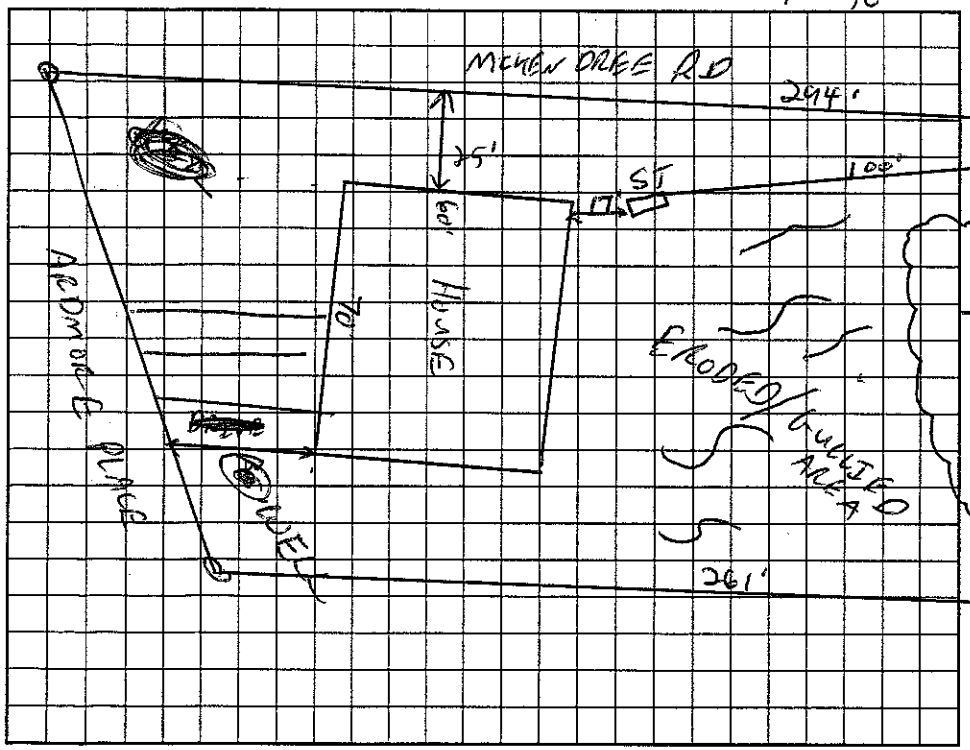
Comments:/Conditions: REMOVE TERRACES AND BERMS

12-7-01 Reviewed house plan in compliance w/ I.P. To be located where shown on sketch. DRH

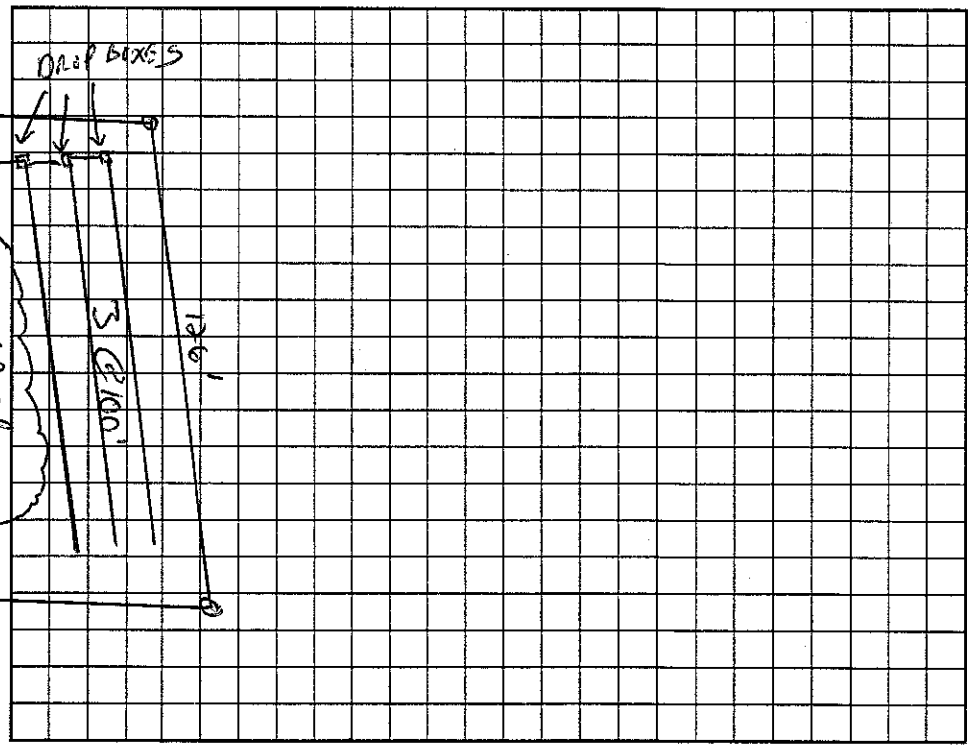
Comments:/Conditions:

Infiltrators installed - 25% reduced

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 9-25-00 Installed by: Larry Beam

Improvement Permit by: _____ RS date 11/8/00 Operation Permit by: Wesley Sparks R.S. date 9/15/02

Authorization to Construct by: _____ RS date 12-7-01 Existing System Inspection by: _____ date _____

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