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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 119628 PIN# ~~4625-50-5104.425~~ 4626-39-8013 DATE 1/25/05

OWNER OR CONTRACTOR THE FARMS LLC / Mecklenburg Homeworks PHONE: Business _____ Home _____

ADDRESS 7214 BRAWLEY SCHOOL RD, MOORESVILLE NC 28115

LOCATION CRAWLEY SCHOOL - TL MCKENDREE - ~~TL~~ TL BAYBERRY - TL IRONWOOD - AT END

SUBDIVISION THE FARMS BLOCK / SECTION 3 LOT 425 LOT AREA .86AC SITE CLASS. LS DESIGN FLOW ~~450.00~~ L.T.A.R. 0.30/0.45

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date _____

Pump Tank: 1000 Gallons; PT 253 Date _____

Pump Make: GOULDS Model WE0 - 3121 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 270

No Lines 3@90' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPP AWC

Repair System Description: SAME

Maintenance Agreement Required: ☐ ~~Yes~~ ☐ No

☒ ~~House/Mod. Home~~ No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

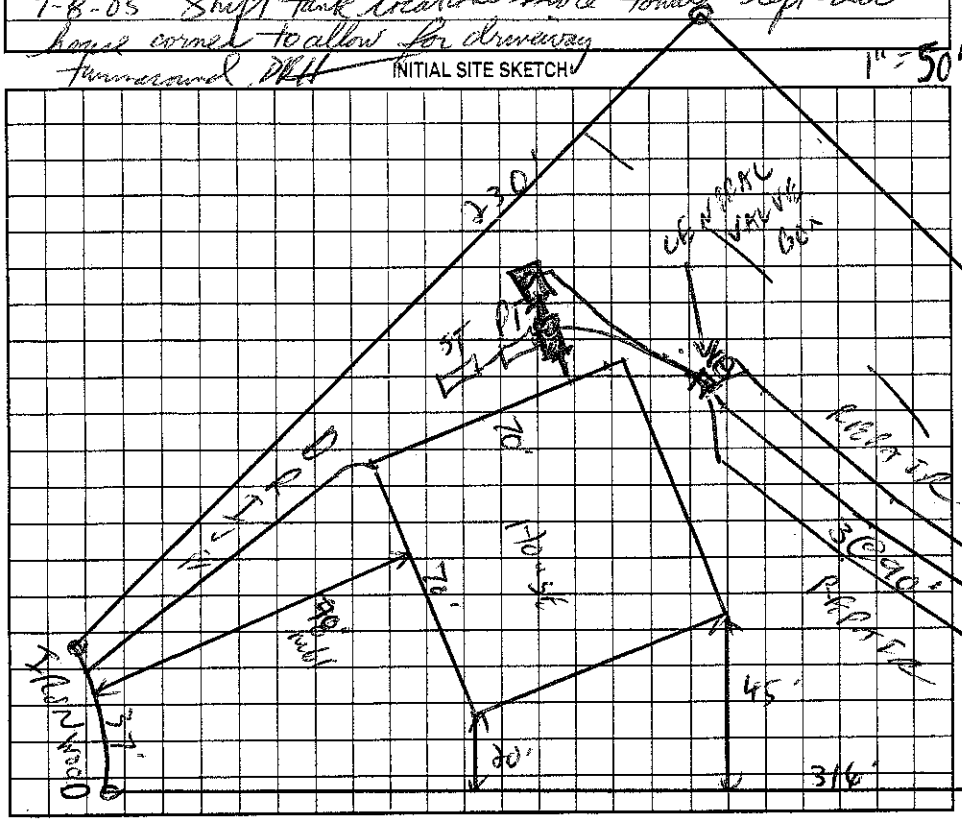
☐ Slab ☒ ~~Crawl Space~~ ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ ~~Community~~

Comments:/Conditions: DO NOT CUT HOUSE SITE

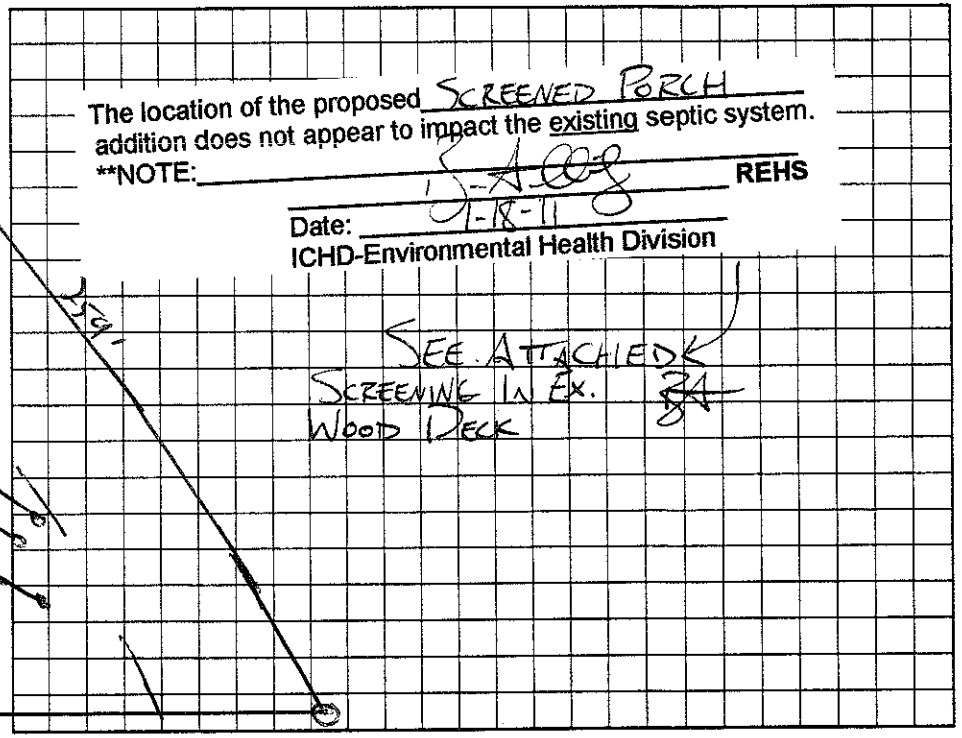
9-8-05 Shift tank location more towards left rear house corner to allow for driveway turnaround DRH

INITIAL SITE SKETCH



Comments:/Conditions:

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: Abernathy

Improvement Permit by: _____ date 1/25/05 Operation Permit by: _____ date 4/4/06

Authorization to Construct by: _____ date 9-8-05 Existing System Inspection by: _____ date _____

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