IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 780.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 11875 PIN# 4626-45-5011 DATE 4/21/05

OWNER OR CONTRACTOR John Spear PHONE: Business 704-636-7454 Home

ADDRESS 377 Agnew Rd Mooresville NC 28117

LOCATION Bradley Sch, TR McKendree, TL Kemp, TL Agnew on corner of Chatfield Cove

SUBDIVISION Clt BLOCK / SECTION 8 LOT 63B LOT AREA 0.95 Ac SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. 0.5

Septic Tank: Existing Gallons; STB Date

Pump Tank: Existing Gallons; PT Date

Pump Make: ZOELLER Model N140 Serial No.

Nitrification Field: No Fields 1 Square Feet 675 Add Linear Feet 225 Add

No Lines 3@75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

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

System Description: Press. Man. 25% Reduction

Repair System Description: LP Panel Block

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 5

☐ Mobile Home No. Bathrooms 5

☐ Business No. Employees

☐ Other

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

Water Supply: ☒ Individual ☐ Public ☐ Community Existing

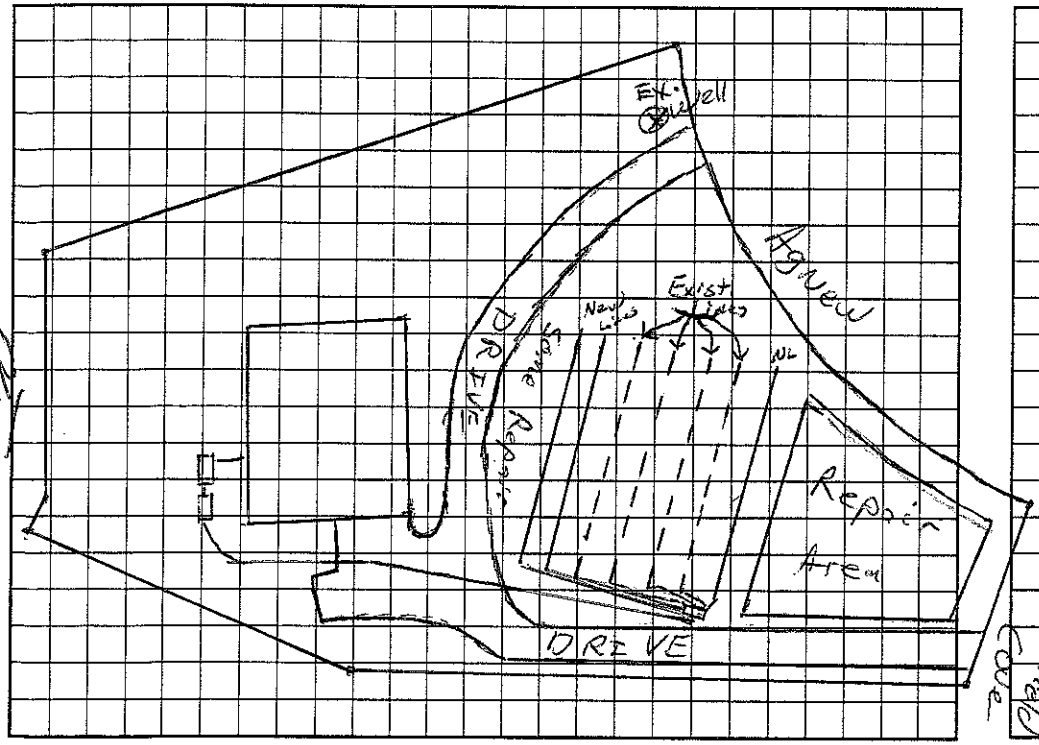
Comments:/Conditions: ~~Add 100~~

Need to reset Manifold To Feed Highest Line

Total System Size will be 7@75'

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed 2 New Lines above Existing and 1 Line Below Excavations

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: John Spear date 4/21/05 Installed by: Rowan Septic

Improvement Permit by: [signature] date 4/21/05 Operation Permit by: [signature] date 5/15/05

Authorization to Construct by: [signature] date 4/21/05 Existing System Inspection by: date

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