IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 112024 PIN# 4626 63 7315.50 7626840782 DATE 4/26/04

OWNER OR CONTRACTOR Strom Const. Inc. PHONE: Business 704-506-4000 Home

ADDRESS 214 Woodchuck Lp. Mooresville, NC. 28117

LOCATION 1100 TR Southfork Lane (R) on Agnew TR Left on Coldwell Creek TR Magnolia Farms TR Dunn Ross Ct. on (R)

SUBDIVISION FARMS BLOCK / SECTION 1 LOT 50 LOT AREA .88AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 338 Date 3/6/04
Pump Tank: 1000 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 3' Max Trench Bottom Depth 3' Gravel Depth NA

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAY - 25% Reduced
Repair System Description: Pres Dosed - 16" PPBAS
Maintenance Agreement Required: ☐ Yes ☒ No

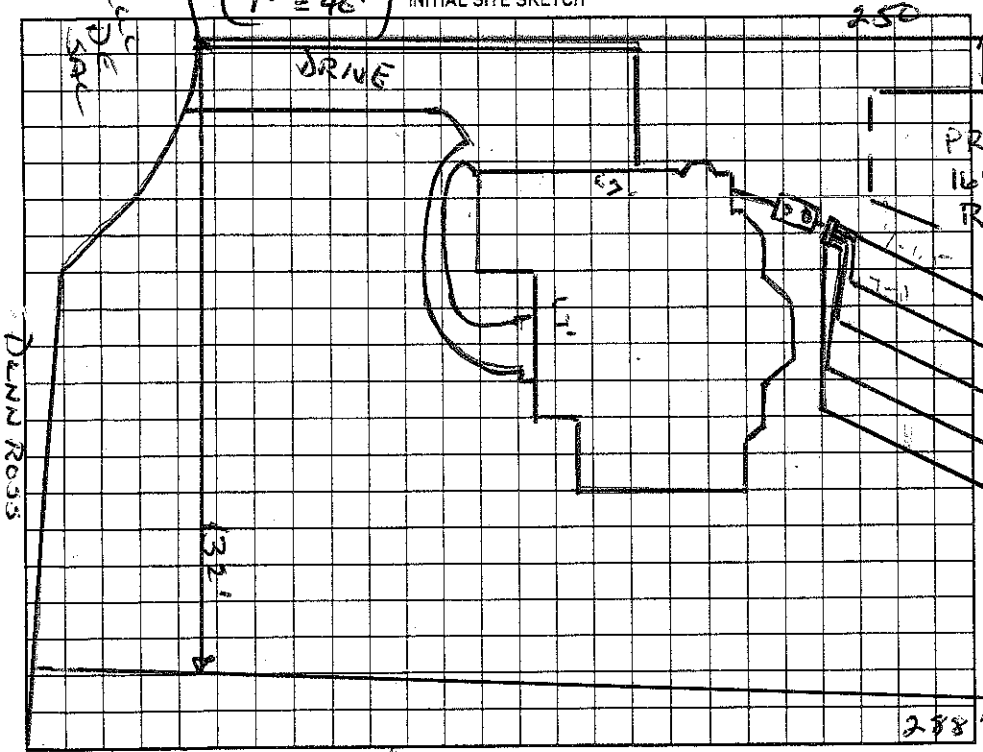
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community

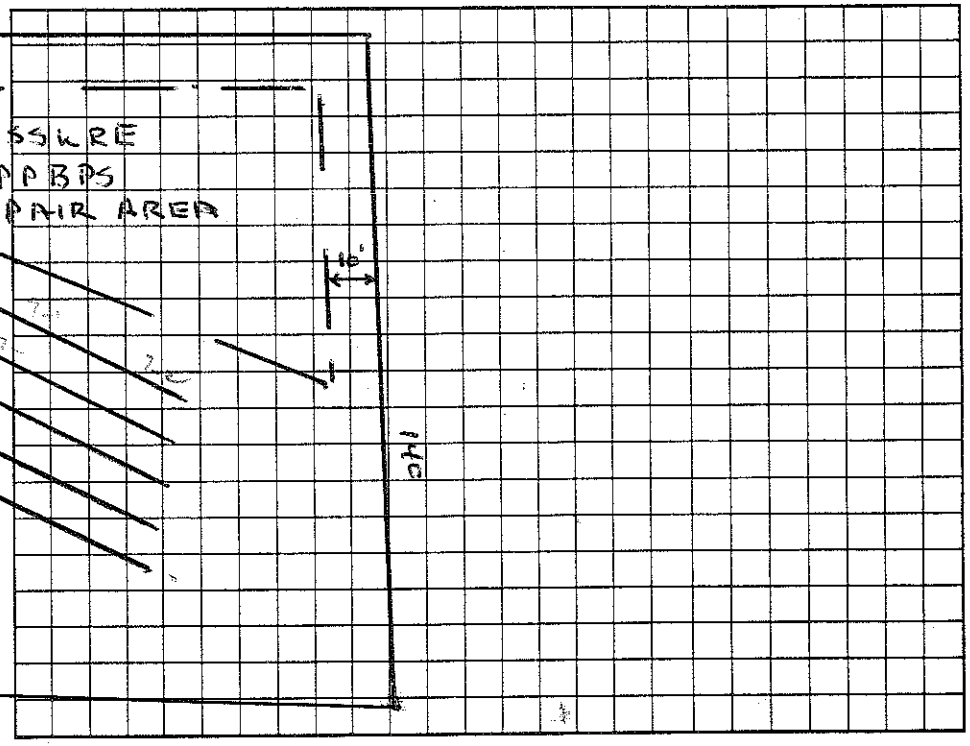
Comments:/Conditions: * Maximum 4 @ 100' x 3' 25% Reduced if more clay is low

Comments:/Conditions:

INITIAL SITE SKETCH (1" = 40')



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: X date 4-29-04 Installed by: Dave Clark

Improvement Permit by: Wesley Sparks RS. date 4/26/04 Operation Permit by: Wesley Sparks RS. date 5/1/04

Authorization to Construct by: Wesley Sparks RS. date 4/26/04 Existing System Inspection by: date

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