IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 078521 PIN# 4625 94 1684 4626911614 DATE 9/20/04

OWNER OR CONTRACTOR Sam Cranor PHONE: Business 704 650-2454 Home 704-658-1079

ADDRESS 147 Springwood Ln. Mooresville NC 28117

LOCATION BSR, TL Great Point, TL Wild Harbor, TL Atlantic Way, on Rt on Corner w/ Breakwater

SUBDIVISION The Point BLOCK / SECTION III LOT 318 LOT AREA 38,145 ft² SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: ~~1000~~ 1500 Gallons; STB 338 Date 8/30/04
Pump Tank: 1000 Gallons; PT 27 Date 8/30/04
Pump Make: Goulds Model VE0512HH4 Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3@153' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: PM 25% Reduction
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other

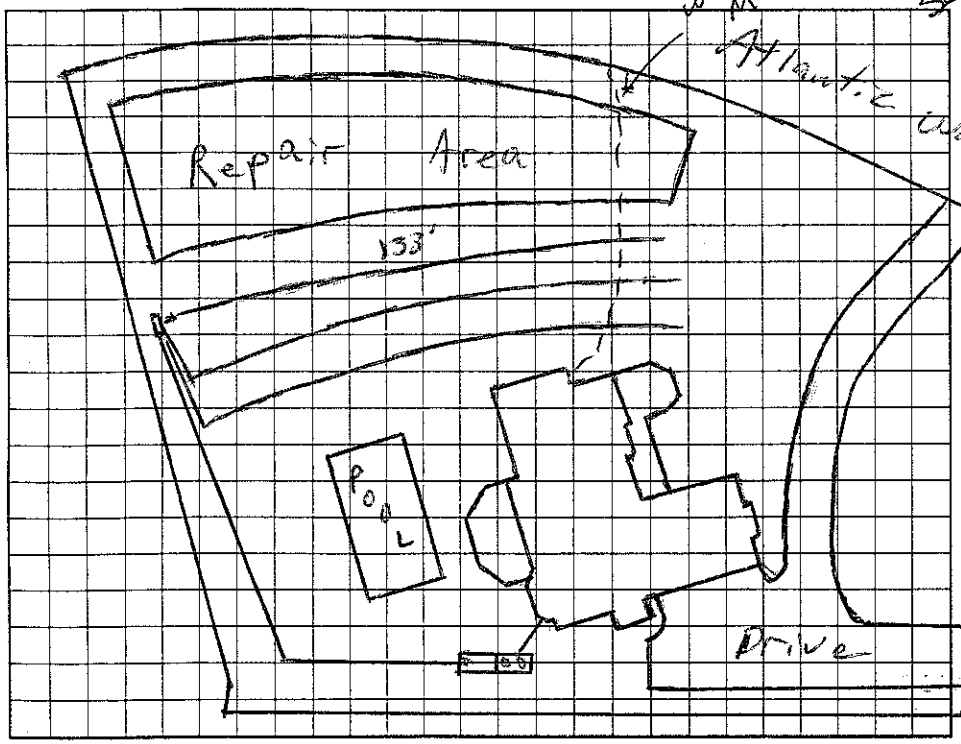
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community

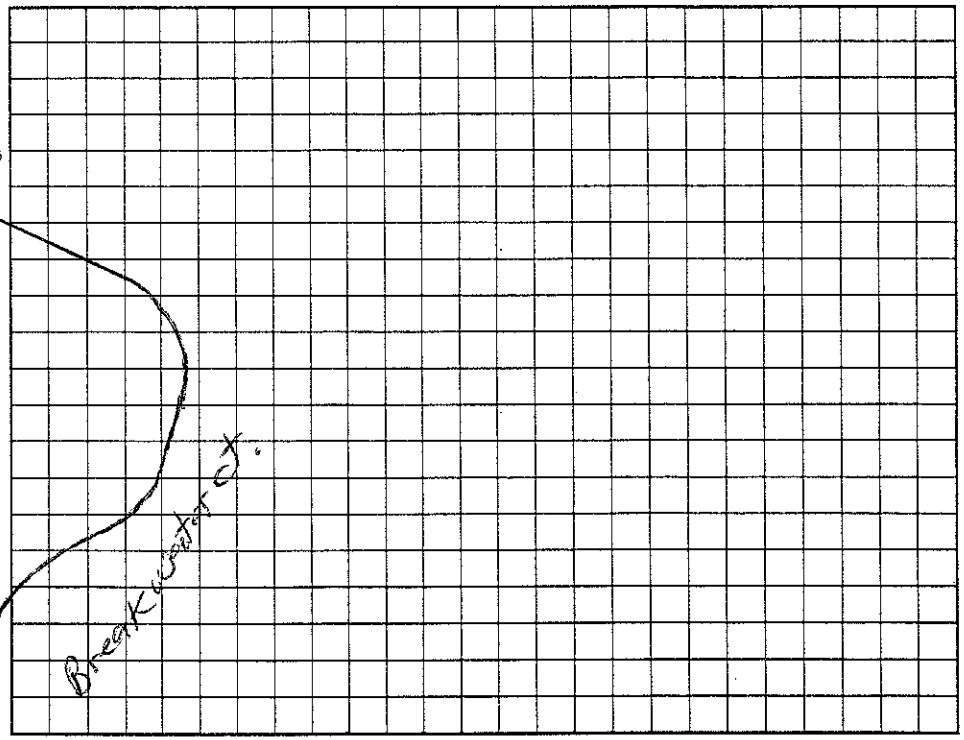
Comments:/Conditions:
1"=50'

Comments:/Conditions:
Water line must be moved 10' from septic system

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: Tony Owen date 9-23-04 Installed by: Orbison

Improvement Permit by: RS date 9/20/04 Operation Permit by: RS date 10/21/04

Authorization to Construct by: RS date 9/20/04 Existing System Inspection by: date

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