IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 $245.00 Paid MOORESVILLE 704-664-5281

Kerry 336 957-7066

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

PERMIT# D05728 PIN# ~~4602791279~~ 4627-81-4797 DATE 2-3-04

OWNER OR CONTRACTOR Moore State Builders PHONE: Business (704) 883-9811 Home

ADDRESS P.O Box 5159 Statesville, NC 28687

LOCATION Brawley School Rd TR Blume TL Beaten Path on left before Honey Suckle Ln.

SUBDIVISION Shavender's Bluff BLOCK / SECTION 1-F LOT 54 LOT AREA .7 acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 6/3/04

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 540' - 810' Linear Feet 270'

No Lines 4 Trench Width 24" - 36" Max Trench Bottom Depth 30" Gravel Depth N/A

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

System Description: Pump - LPP - Pinel Block

Repair System Description: Same

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4 No. Employees

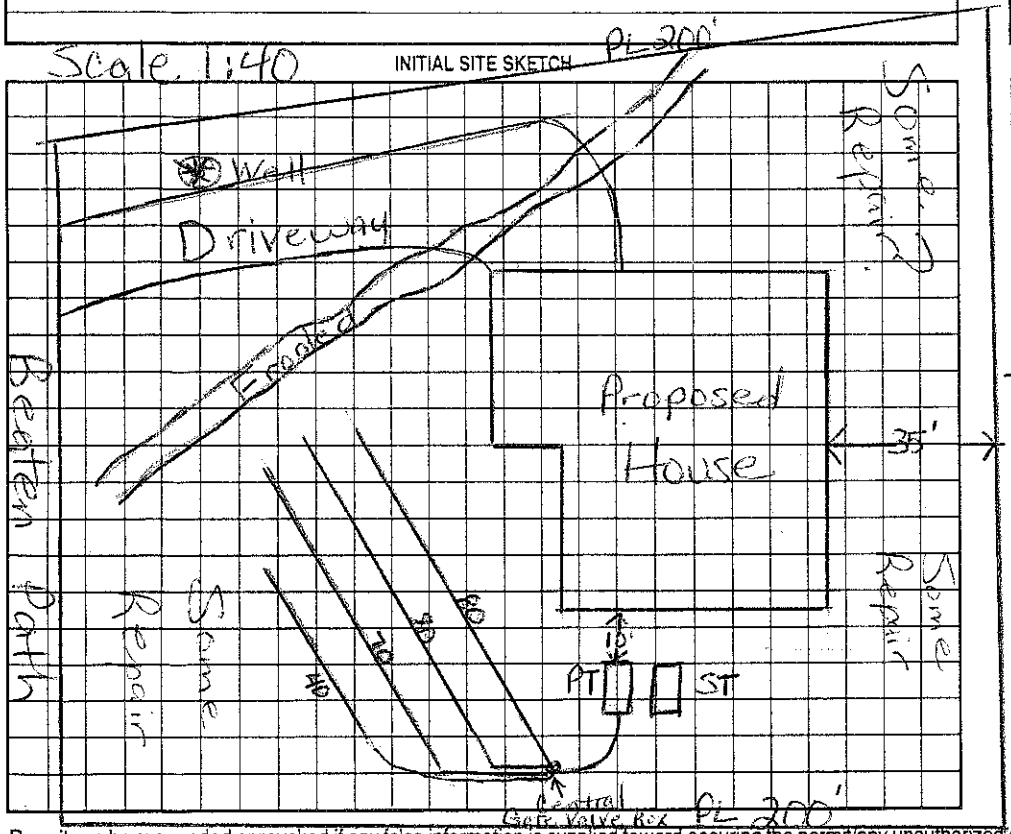
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

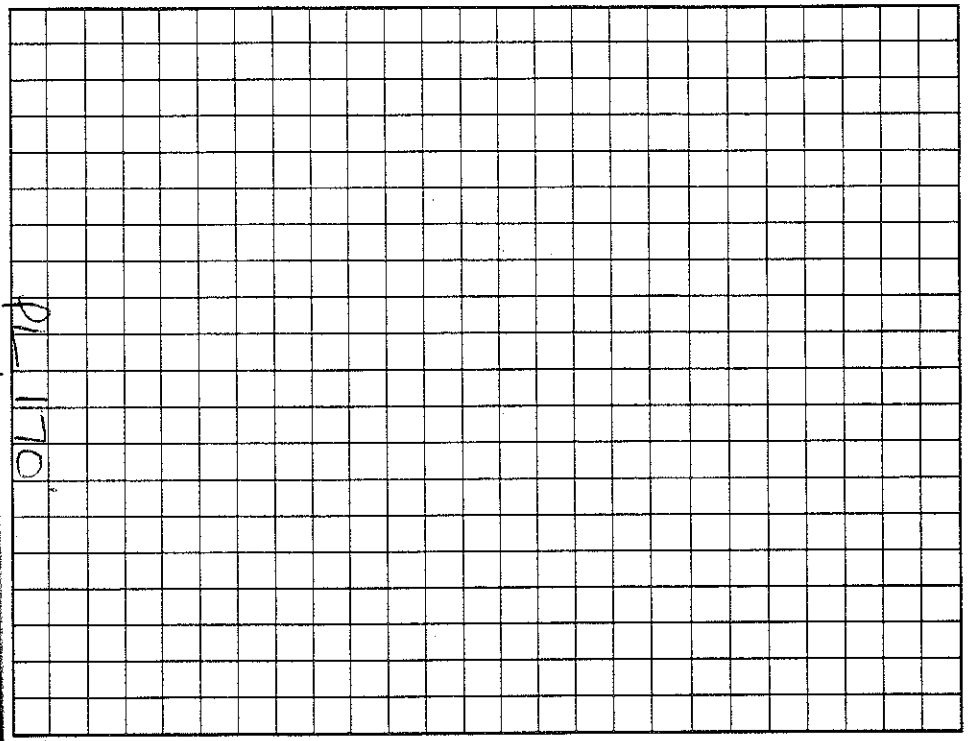
Comments:/Conditions:

Comments:/Conditions: Note: Site visit 3/22/04 w/ Builder okay to grade down back left Corner w/ ft. 3/16" holes

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: John Cheney date 2/20/04 Installed by: Rowan Septic

Improvement Permit by: Maria H. Dotson RS date 2/3/04 Operation Permit by: RS date 9/23/04

Authorization to Construct by: Maria H. Dotson RS date 2/20/04 Existing System Inspection by: date

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