IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 113477 PIN# 4627-88-5496.024 4627-87-4539 DATE October 13, 03

OWNER OR CONTRACTOR Coreenbay Forest LLC / Mike Morris PHONE: Business 622-9066 Home

ADDRESS P.O. Box 3608, Mooresville N.C. 28117

LOCATION 150 West TL Brandise Peninsula TL Greenbay on left

SUBDIVISION Coreenbay Forest BLOCK / SECTION LOT 24 LOT AREA 1.15 ac SITE CLASS. PS DESIGN FLOW 440 gpd L.T.A.R. .225

Septic Tank: 1000 Gallons; STB 794 Date 8/21/04

Pump Tank: 1000 Gallons; PT 2-1 Date 8/21/04

Pump Make: Myers Model M-V1100-21 Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: pin - 25% Reduction

Repair System Description: LF/pin 25-50% Reduction

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

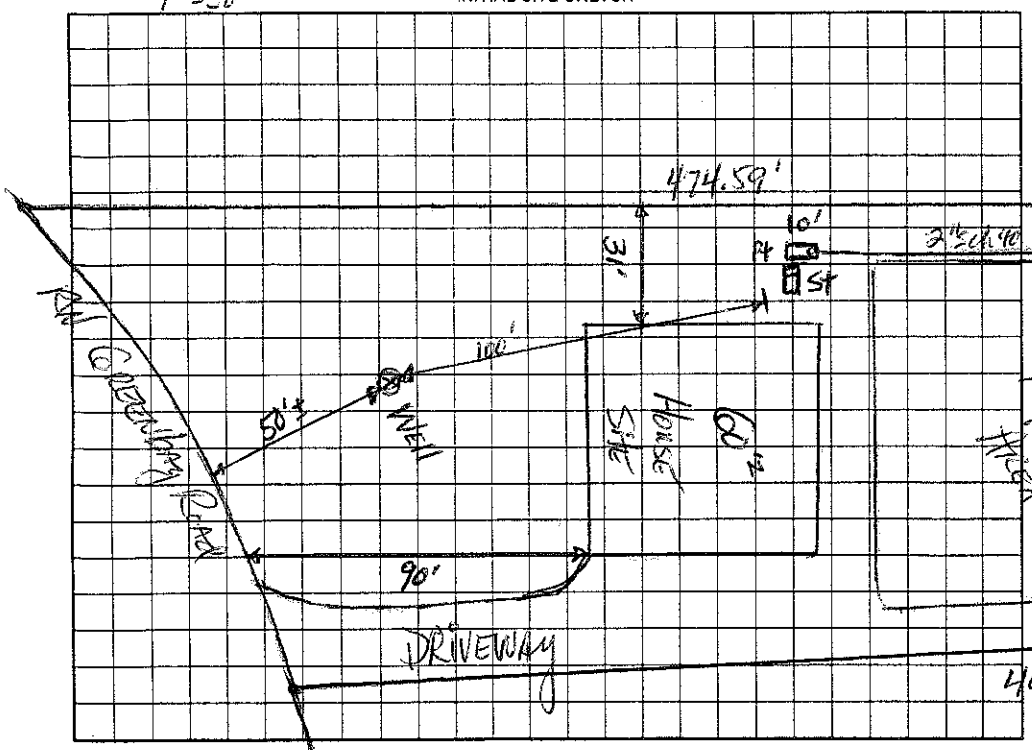
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Reviewed Building plans & Site plans 3/29/04, essentially the same as original permit.

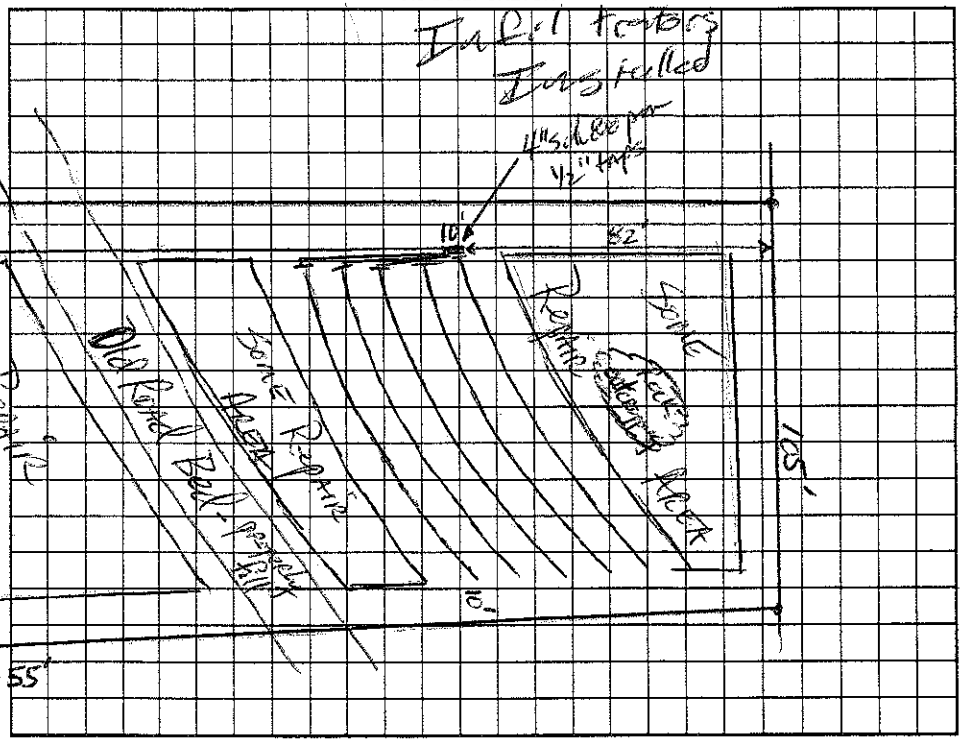
Comments:/Conditions:

INITIAL SITE SKETCH

1" = 50'



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 10-30-03 Installed by: McLeod Const.

Improvement Permit by: RS date 10-13-03 Operation Permit by: RS date 12/7/04

Authorization to Construct by: RS date 3/29/04 Existing System Inspection by: date

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