IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 130.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 107373 PIN# ~~4627 90 7412.331~~ 4627 90 9868 DATE 7/16/03

OWNER OR CONTRACTOR Kevin Huffstetler PHONE: Business 704-361-8951 Home

ADDRESS 147 Dobbin Lane Mooresville, NC. 28117

LOCATION 1100 TR Blume TL Beaten Path TL Cicero TL Shoreacres TL Palmer Marsh TL Archbell at end

SUBDIVISION Shoreacres Bluff BLOCK / SECTION 3 LOT 331 LOT AREA 1.07 AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 3/2/03 Date 4/20/03

Pump Tank: 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 No

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

System Description: DRop Box - 25% Reduced

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2.5

☐ Business No. Employees

☐ Other

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

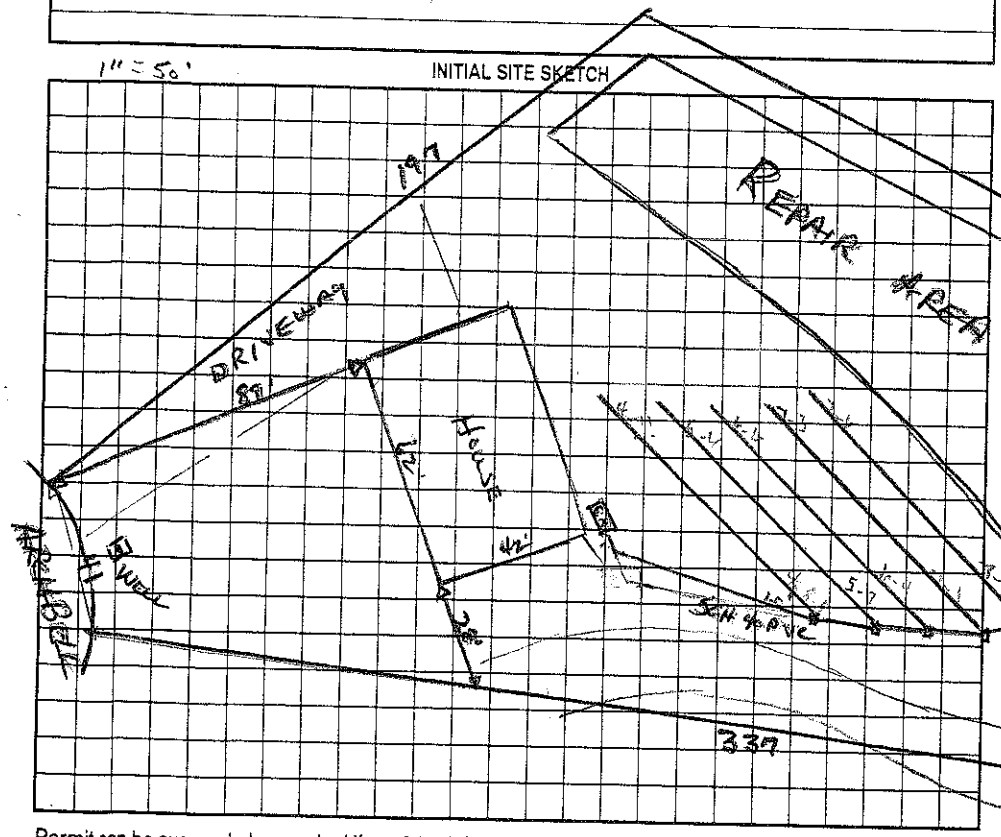
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

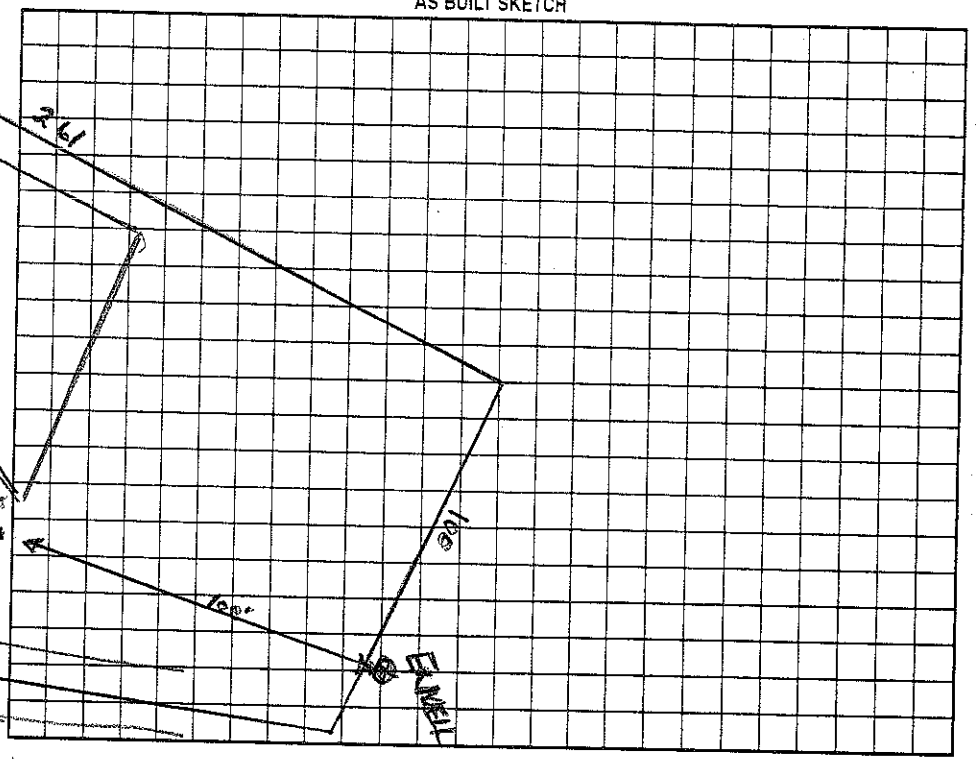
Comments:/Conditions: EZ FLOW INSTALLED

1" = 50'

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: X date 7/18/03 Installed by: Tim Simmons

Improvement Permit by: Wesley Sparks RS date 7/18/03 Operation Permit by: Wesley Sparks RS date 7/18/03

Authorization to Construct by: Wesley Sparks RS. date 7/18/03 Existing System Inspection by: date

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