11:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 111885 PIN# 4628307775 DATE 5-9-03

OWNER OR CONTRACTOR Brenda Mason PHONE: Business Dave White 309-4301 Home

ADDRESS 154 Bain Lane Mooresville, NC 28117

LOCATION Hwy 150 W. TL Mariner Pt. 200 yds on right

SUBDIVISION Pinnacle Shores BLOCK / SECTION 3 LOT 5 LOT AREA .85 Acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 9-22-03
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 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: * Gravity - 25% Reduction
Repair System Description: Gravity - Innovative
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other ____

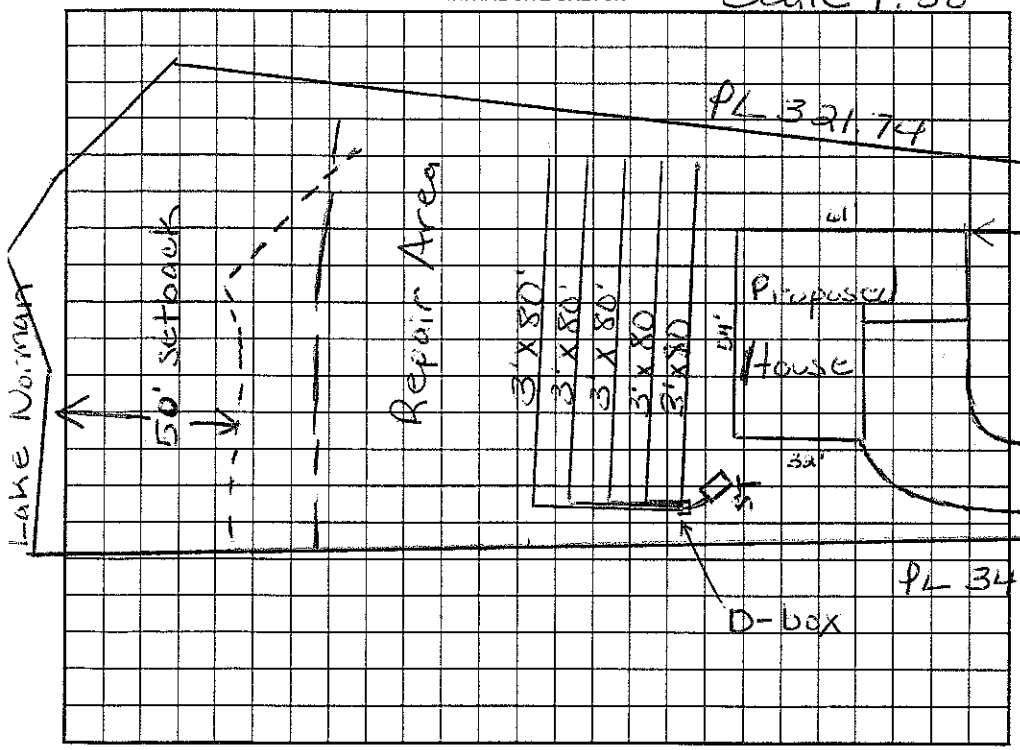
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☒ Community

Comments:/Conditions: Keep Septic System at least 10' to PL & 50' from 760 contour

Comments:/Conditions: * 25% Reduction in Drainfield area (Plastic Chamber or EZ Flow)
D-box checked 10/31/03

INITIAL SITE SKETCH Scale 1:50'



AS BUILT SKETCH

Installed Plastic Chambers for Drainfield as Shown

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: [signature] date 5/9/03

Improvement Permit by: Maria H. Dotson RS date 5/9/03

Authorization to Construct by: Maria H. Dotson RS date 5/9/03

Installed by: Curt Dunning

Operation Permit by: Maria H. Dotson RS date 10/31/03

Existing System Inspection by: ____ date ____

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