IREDELL COUNTY HEALTH DEPARTMENT

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

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

(11:30)

PERMIT# 074762 PIN# 4628 61 4439 DATE 8/13/98

OWNER OR CONTRACTOR James T Flowers PHONE: Business 985-5478 Home

ADDRESS 123 Manitoba Lane Mooresville, NC. 28115

LOCATION 150' W TR Pinnacle Shores TR Manitoba Lane at end on (L) of center

SUBDIVISION Pinnacle Shore BLOCK / SECTION 1 LOT 15 LOT AREA .6 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 11/17/97
Pump Tank: 1000 Gallons; PT 27 Date 2/15/99
Pump Make: Cowles Model WE05111H Serial No. #98237776
Nitrification Field: No Fields 1 Square Feet 600* Linear Feet 200*
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND

[X] New System [ ] Repair System Type: I, II, III, (IV) V, VI
System Description: Low Pressure - 16" PBS
Repair System Description: 16" Panel on Lot 15A
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 3
[ ] Business No. Employees
[ ] Other

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

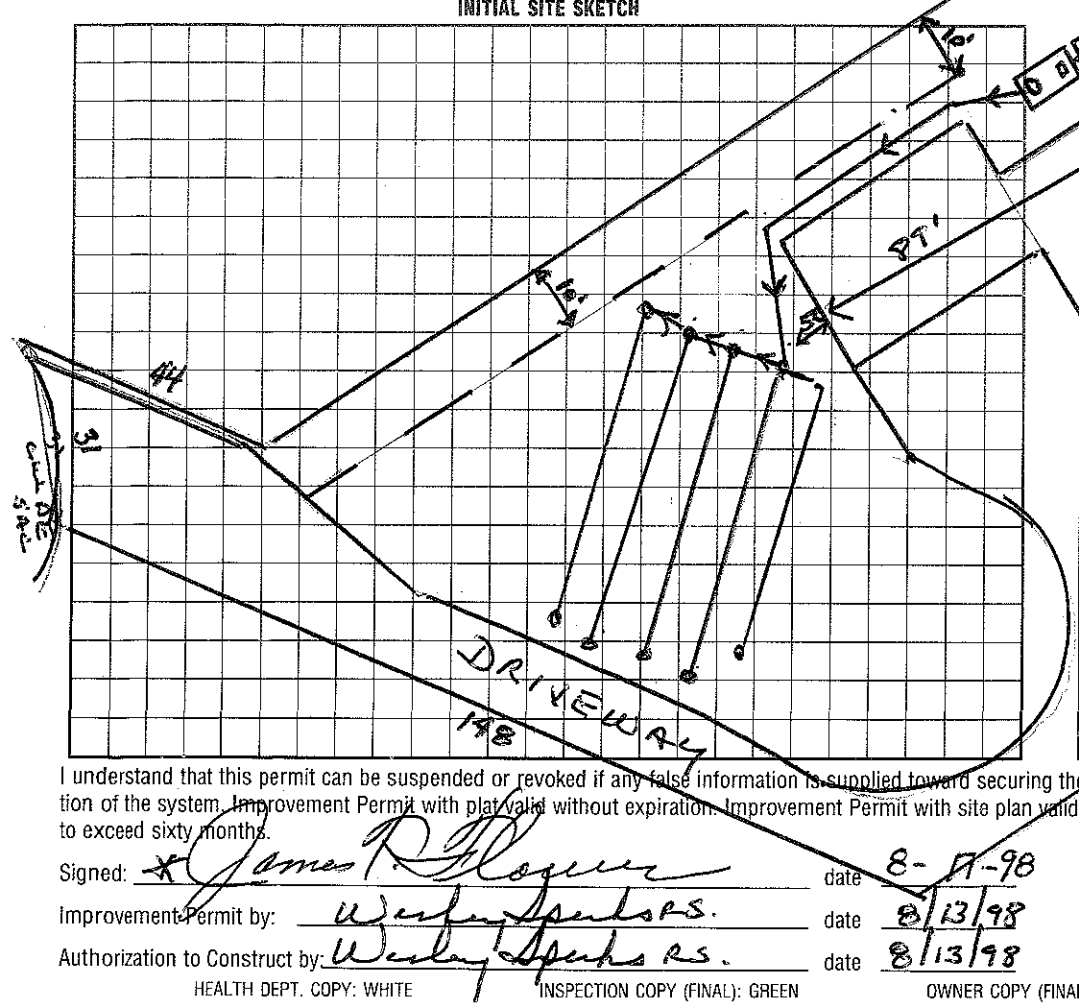
Water Supply: [ ] Individual [ ] Public [X] Community

Comments:/Conditions:

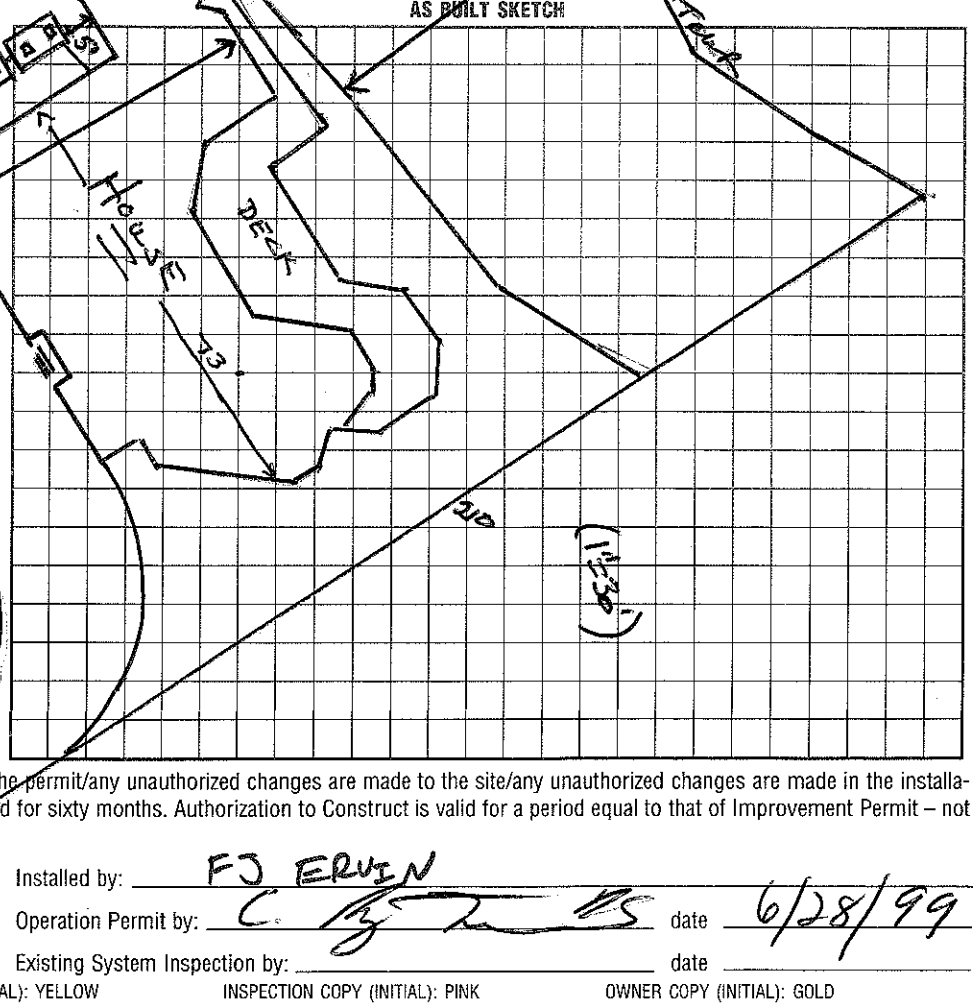
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Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 James R. Flowers date 8-17-98

Improvement Permit by: Wesley Sparks RS. date 8/13/98

Authorization to Construct by: Wesley Sparks RS. date 8/13/98

Installed by: FJ ERVIN

Operation Permit by: C. [illegible] date 6/28/99

Existing System Inspection by: date

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