IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 078177 PIN# ~~4625 84 2807~~ 4635-09-4035 DATE 4/19/01

OWNER OR CONTRACTOR Tom Stevenson Builders PHONE: Business 704-660-6638 Home

ADDRESS 677 Brawley School Rd. Mooresville, NC.

LOCATION 1100 Tl Brawley Harbor Place at end on (L)

SUBDIVISION POINTE BLOCK / SECTION 2 LOT 254 LOT AREA 41000 FT² SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 338 Date 1-27-02
Pump Tank: 1000 Gallons; PT 283 Date 1-18-02
Pump Make: Myers Model ME.50 Serial No.
Nitrification Field: No Fields 1 Square Feet 600* Linear Feet 300*
No Lines 4 @ 75' Trench Width 2' Max Trench Bottom Depth 3' Gravel Depth No

☒ New System ☐ Repair System Type: I, II, III, (IV) V, VI
System Description: LP – 16" PPBAS
Repair System Description: SAME
Maintenance Agreement Required: ☒ Yes ☐ No

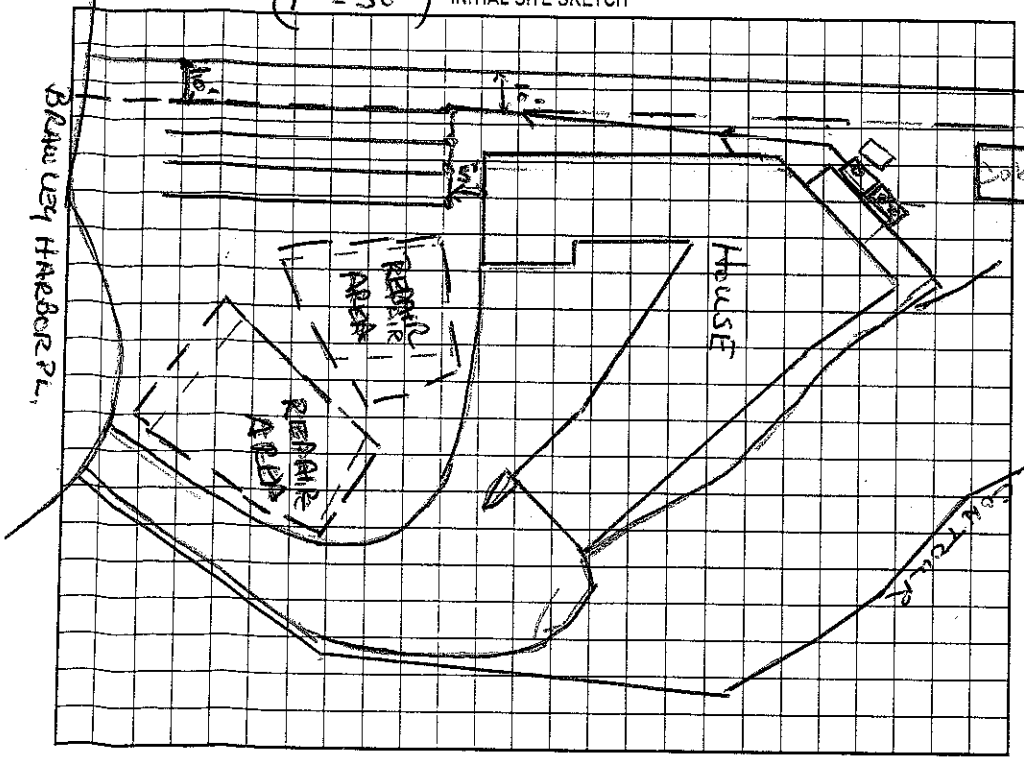
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community

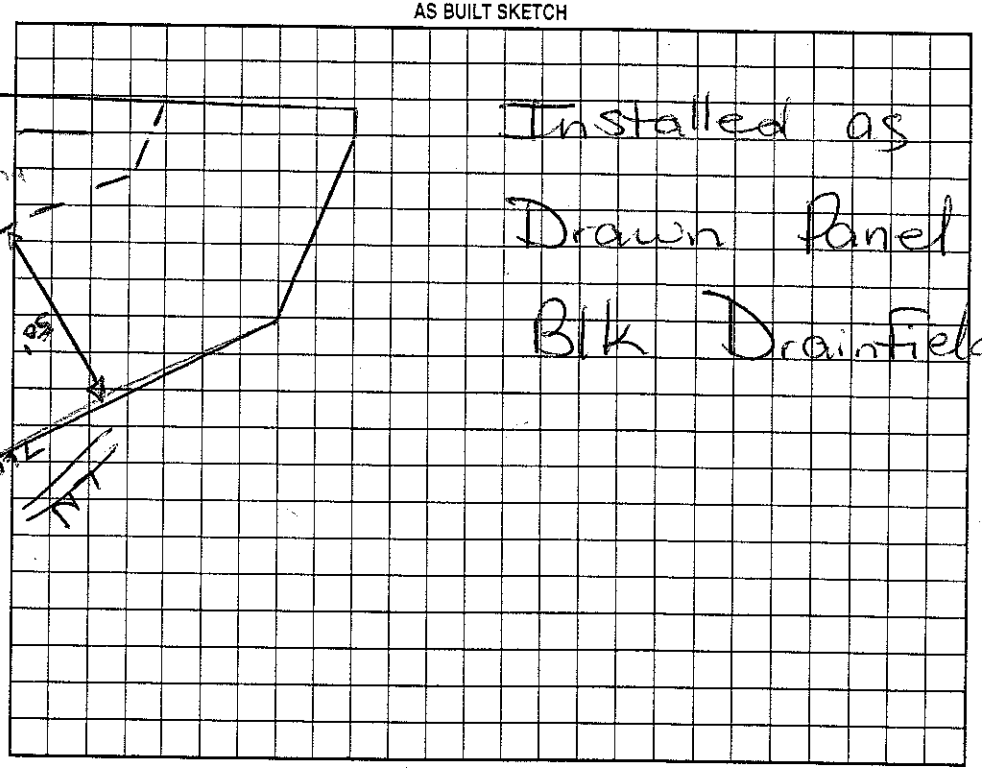
Comments:/Conditions:

Comments:/Conditions: Tanks checked 3/26/2002
Lines checked 4/4/2002
Pres, electrical & alarm 5/29/02 checked

(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: ✕ James K. Anderson date 4/20/01

Improvement Permit by: Wesley Sparks RS. date 4/26/01

Authorization to Construct by: Wesley Sparks RS date 4/26/01

Installed by: R & H date

Operation Permit by: Mark H. Nelson RS date 5/29/02

Existing System Inspection by: date

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