IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 134887 PIN# 4635-69-4461 4635-69-4450 DATE 6/14/06

OWNER OR APPLICANT William Chesly PHONE: Business _____ Home _____

ADDRESS 287 Commodore Lp Mooresville NC 28117

LOCATION BSR, TL Stutts, TL 2nd Commodore Lp, on Rt

SUBDIVISION Commodore Pen BLOCK / SECTION _____ LOT 103 LOT AREA 0.384 ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.5

Septic Tank: 1000 Gallons: STB 1017 Date 4/12/07

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 400 Linear Feet 200

No Lines 4@50' Trench Width 24" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: Gravity Panel Block

Repair System Description: None (-1945c)

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

Water Supply: ☐ Individual ☐ Public ☒ Community

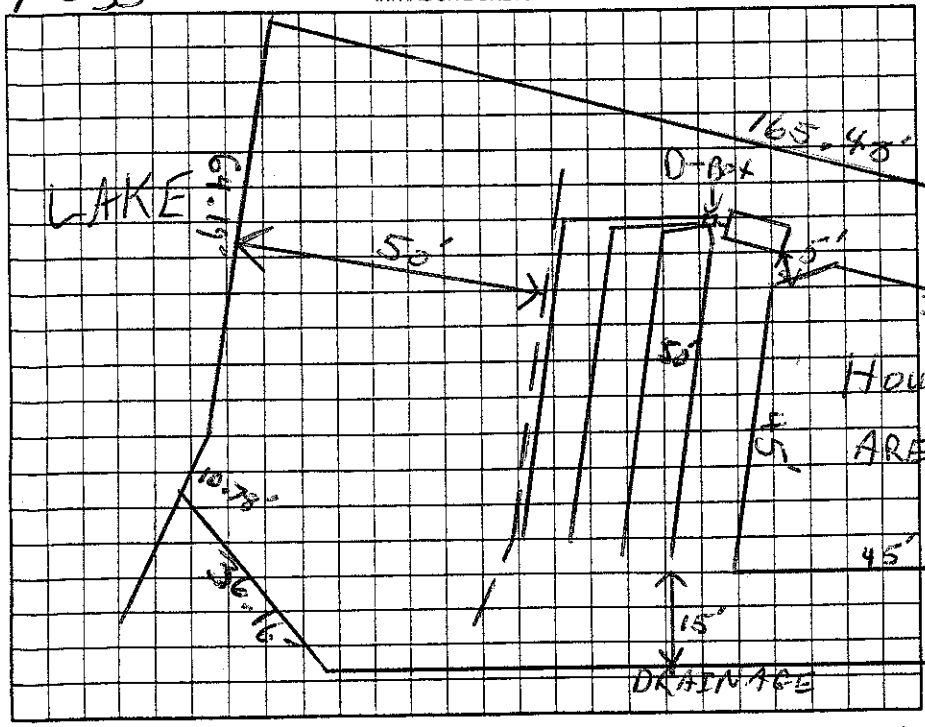
Gravel Depth — ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: Berm following 50' setback must be removed.

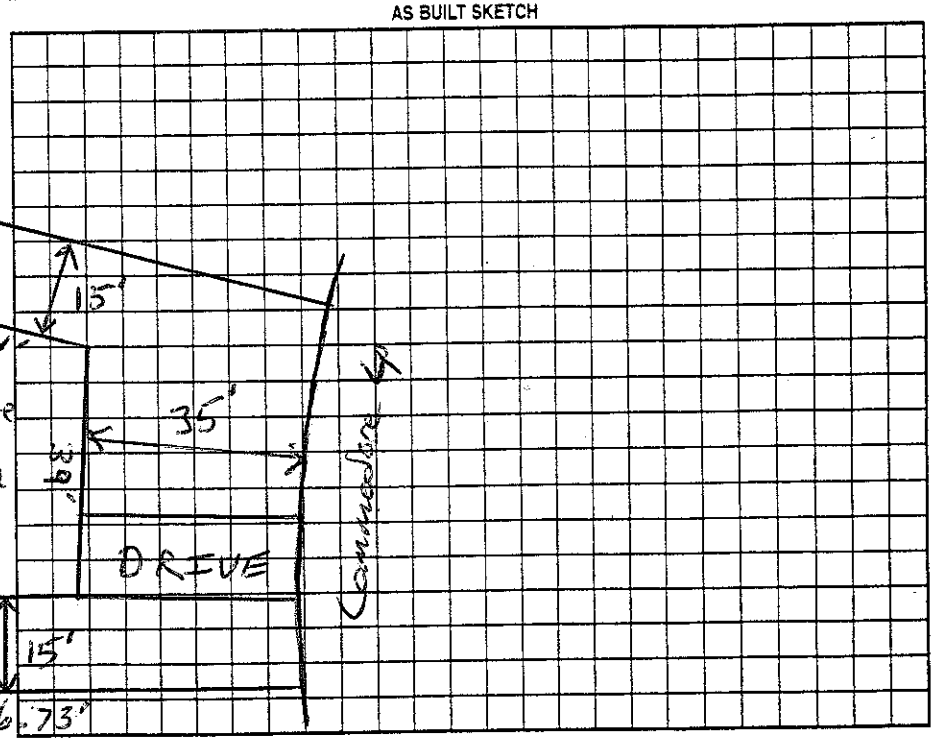
Comments:/Conditions: 10/3/07
House will fit in envelope, plans essentially same showing 3 BR's, -AC

1"=30'

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 plan 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: Frances E Chesly date 6-15-06

Improvement Permit by: _____ RS date 6/14/06

Authorization to Construct by: Anthony Cole Jr date 10/3/07

Installed by: C&S

Operation Permit by: Wesley Sparks RS date 1/15/08

Existing System Inspection by: _____ date _____

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