Site Address: 225 Commodore Lane; Mrsvl.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 132TOT 214150 PIN# 4635798696 DATE 1-9-08

OWNER OR APPLICANT Tillman W. Brown PHONE: Business 704-663-5735 Home 704-902-8228

ADDRESS 342 Ponderosa Circle Mooresville NC 28117

LOCATION Brawley School Rd TL Stutts TL 1st Commodore Lp on left

SUBDIVISION Commodore Penn. BLOCK / SECTION ____ LOT 51 LOT AREA 14,553 sq ft. SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3gpd/ft²

Septic Tank: 1000 Gallons; STB 10/2 Date 4-10-15
Pump Tank: 1000 Gallons; PT 17 Date 9-29
Pump Make: Gould's Model PES1M Serial No. ____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 200
No Lines 7 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A ☐ Gravity ☒ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: LPPPBPS
Repair System Description: max feasible Rule .1945
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons 6 No. Employees ____

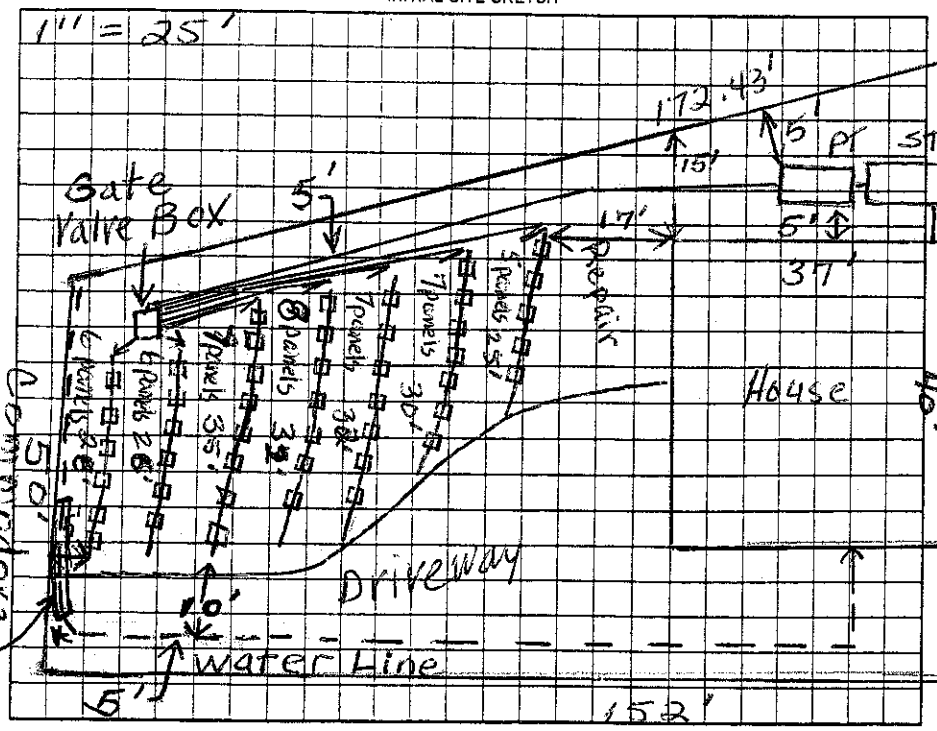
Water Supply: ☐ Individual ☐ Public ☒ Community

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

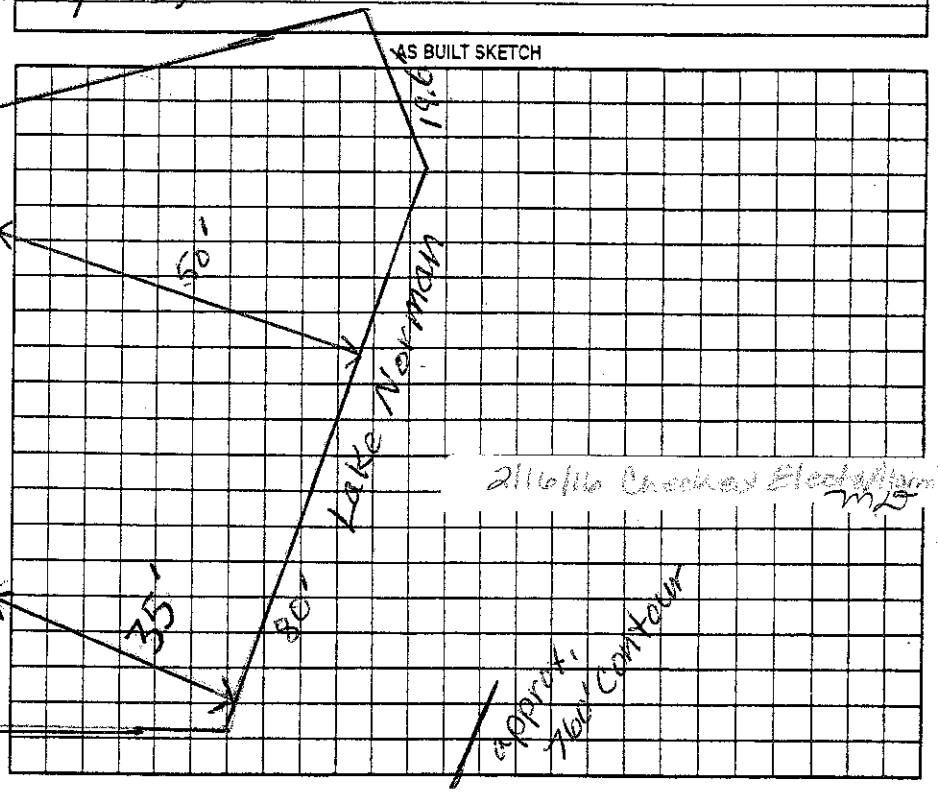
Comments:/Conditions: Water line 5' from property line
Septic lines 10' from water line (15' from side property line)
-46 panels-

Comments:/Conditions: CHECKED LINES, TANKS, SET 2' PH BA 12-11-15
WATER LINE SLEEVED WHERE SHOWN

INITIAL SITE SKETCH



AS BUILT SKETCH



2/16/16 Checked Electrician MLP

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: Tillman Wright Brown date 1-17-08 Installed by: Tommy FRY

Improvement Permit by: Judy McNilly date 1-10-08 Operation Permit by: Maria Dotson RS date 3/11/16

Authorization to Construct by: Judy McNilly date 1-11-08 Existing System Inspection by: ____ date ____

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