IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# No PIN# 4635 90 5753 - 4635 90 5836 DATE 3/4/08

OWNER OR APPLICANT Jordan Folger PHONE: Business Home 704 - 400 - 7360

ADDRESS 108 Lakeshore Dr. Mooresville, NC. 28117

LOCATION 1155 TR Langtree Rd. TR 135 Lakeshore Dr. house on (R) Corner

SUBDIVISION LAKEVIEW SHORES BLOCK / SECTION D LOT 24425 LOT AREA SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 3[illegible] Date 11/3/07

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 3' Max Trench Bottom Depth 3'

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

System Description: 25% REDUCTION "ACCEPTED"

Repair System Description: 25% REDUCTION "ACCEPTED"

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons No. Employees

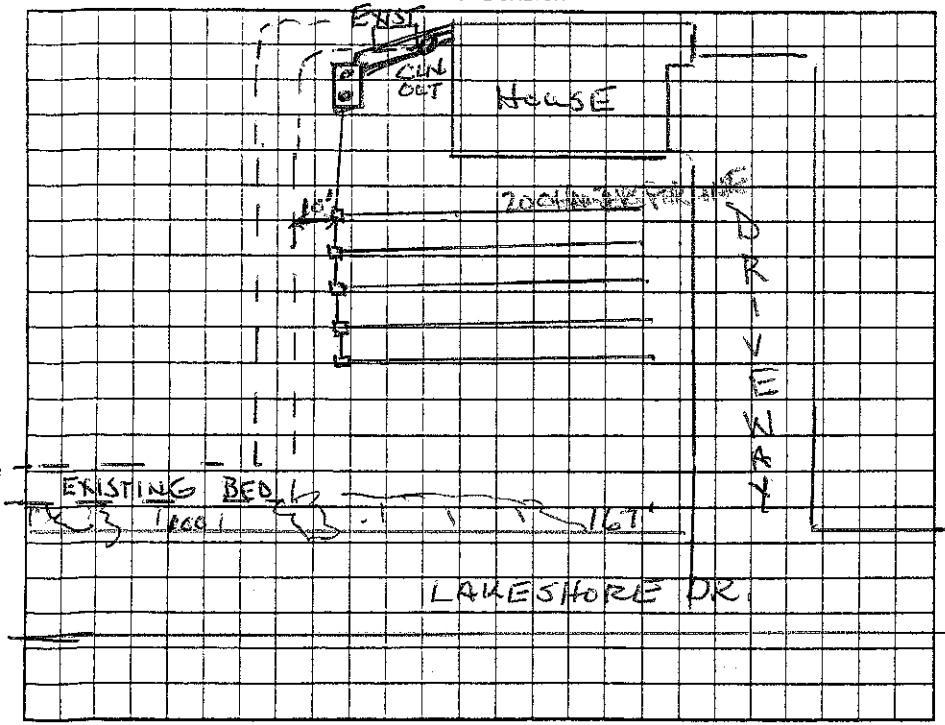
Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth No ☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

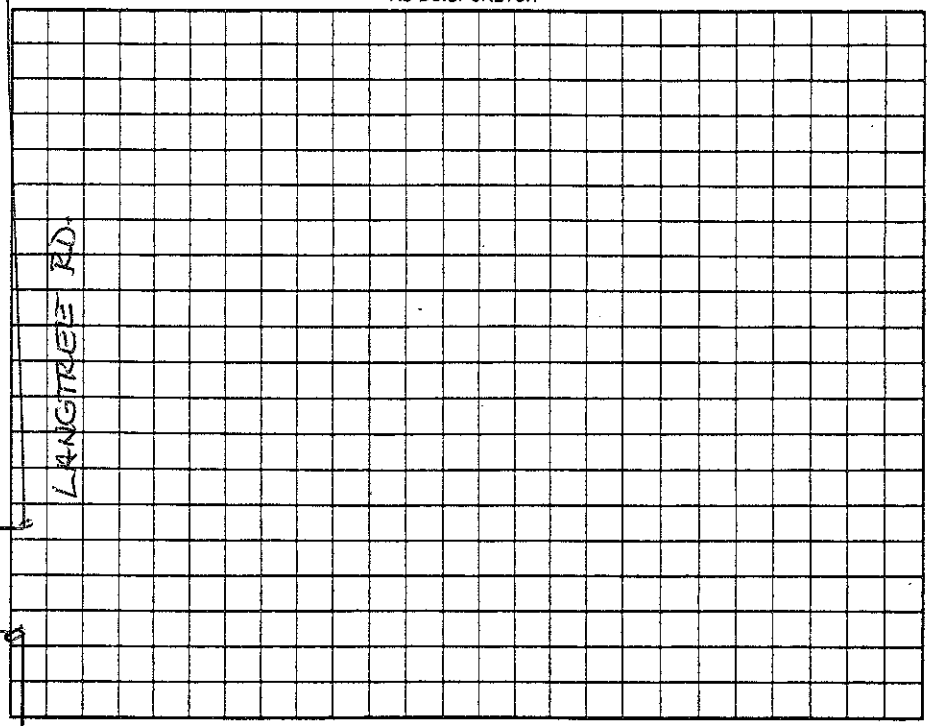
Comments/Conditions: GRAVITY REPAIR - REPLACE SEPTIC TANK WITH FILTER (Pool)

Comments/Conditions: OW tank crushed + buried in place

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: X [signature] date

Improvement Permit by: Wesley Sparks R.S. date 3/4/08

Authorization to Construct by: Wesley Sparks RS date 3/4/08

Installed by: Hanley Septic Service

Operation Permit by: Wesley Sparks RS date 4/11/08

Existing System Inspection by: date

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