IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125141 PIN# 4636181696.000 4636-08-1751 DATE Feb 20, 06

OWNER OR APPLICANT Dockside Development / Lande Homes PHONE: Business 704-439-2029 Home

ADDRESS 17824 Statesville Rd., Suite 122, Cornelius, N.C. 28031

LOCATION Beaty Sub RD TR Blume immediately TL Beechtree ~1/4 mile TR Chestnut Bay LN. on left at end

SUBDIVISION Beechtree Bay BLOCK / SECTION LOT 6/6A LOT AREA 1.02Ac + SFE SITE CLASS: PS SFE DESIGN FLOW 480gpd L.T.A.R. .3 SFE 6A

Septic Tank: 1000 Gallons; STB 524 Date 2-13-07
Pump Tank: 1000 Gallons; PT 27 Date 4-23-07
Pump Make: Myers Model P102 Serial No.
Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 270
No Lines 4 Trench Width 24" min 8'oc Max Trench Bottom Depth 36" Gravel Depth NA ☐ Gravity ☒ Pressure

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

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons
☐ Business No. Employees
☐ Other

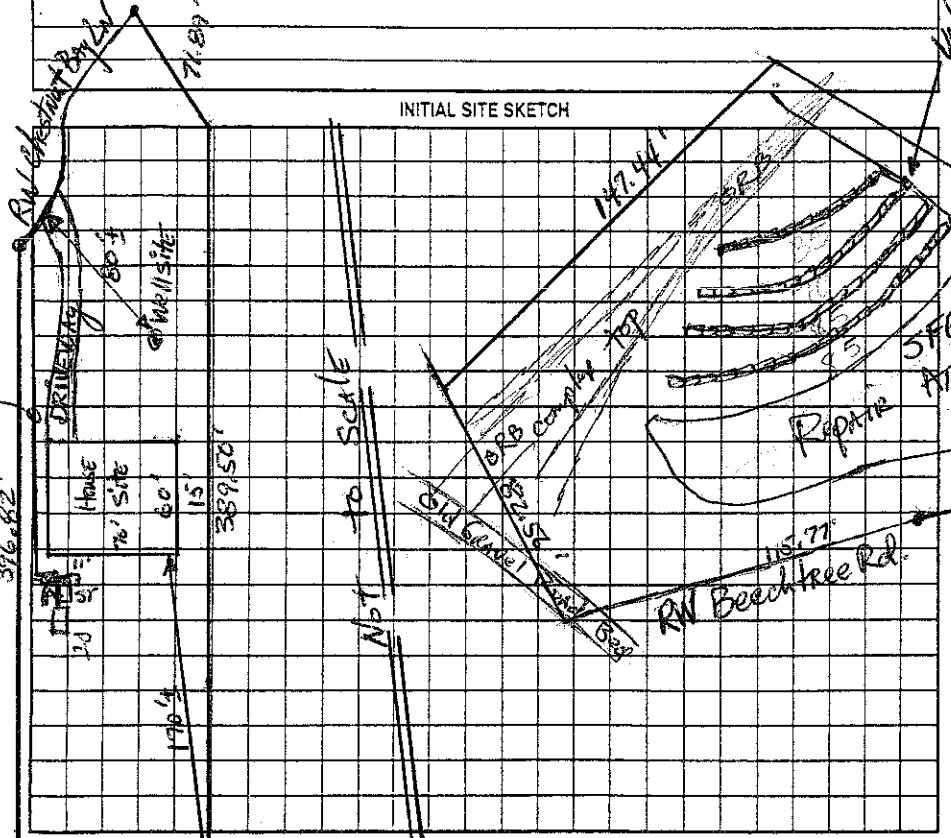
Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions:

Comments:/Conditions: Checked lines & tanks 7/31/07

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed lines as shown

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: [signature] date 3-24-06
Improvement Permit by: [signature] date 3-20-06
Authorization to Construct by: [signature] date 11/1/06

Installed by: R&H BS
Operation Permit by: [signature] date 11/2/07
Existing System Inspection by: date

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