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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 133886 PIN# 4636 14 5068 DATE 3/7/06

OWNER OR APPLICANT SBME / Orleans PHONE: Business _____ Home _____

ADDRESS 1050 DENVER BUSINESS PARK DR MOORESVILLE, NC 28115

LOCATION BRAWLEY SCHOOL RD (R) ISLE of PINES (R) COVE CREEK (L) LOT 275 COVE CREEK RD

SUBDIVISION CHESAPEAKE PT BLOCK / SECTION 1 LOT 95 LOT AREA 1.23 ACRES SITE CLASS PS DESIGN FLOW 480 GPD L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 194 Date 4-18-13
Pump Tank: 1000 Gallons; PT 283 Date 4-18-13
Pump Make: Hydromatic Model Sneet 75 Serial No. _____
Nitrification Field: No Fields 1 Square Feet eq 1920 Linear Feet 480
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

☒ New System ☐ Repair ☐ Expansion System Type: I II (IV)b IV V VI
System Description: 25% REDUCTION
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

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

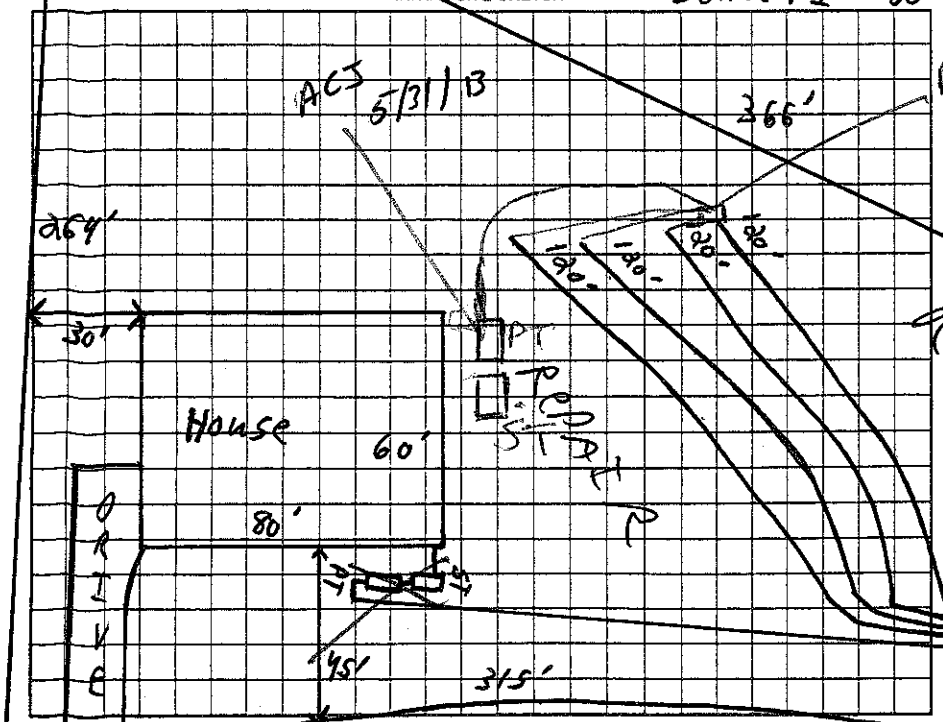
Water Supply: ☐ Individual ☐ Public ☒ Community

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

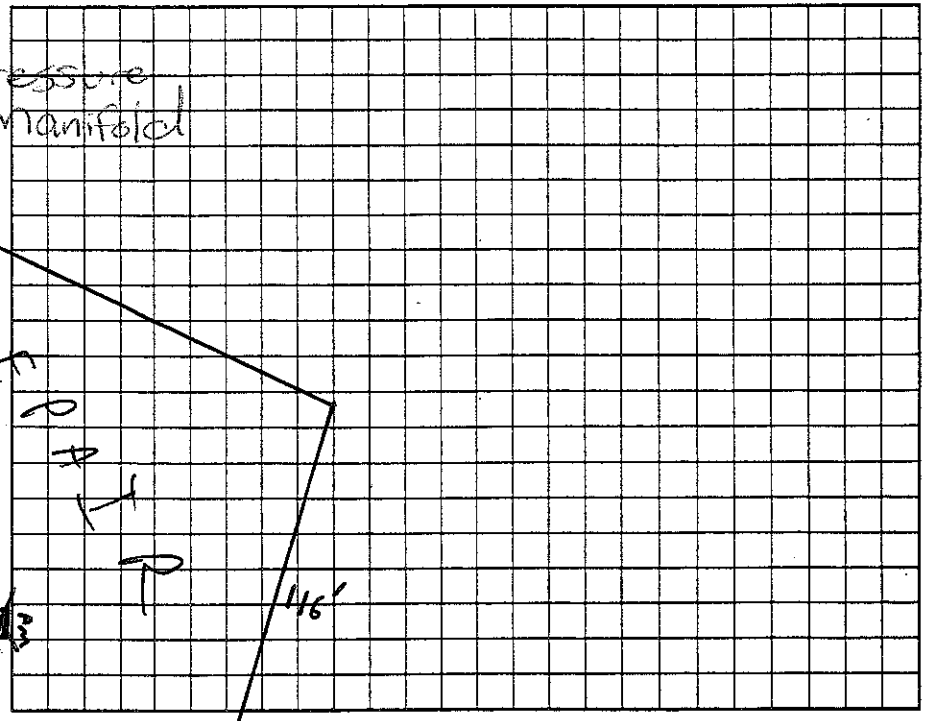
Comments/Conditions: INSTALL ON CONTOUR. MAINTAIN SETBACKS. SEE ATTACHED PUMP AND PRESSURE MANIFOLD SHEETS.

Comments/Conditions: 5/22/13 Set 2FT pressure
Used Quick 4
5/22/13 Checked tanks, lines & pressure

INITIAL SITE SKETCH Scale: 1" = 50'



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: Randall Alford date 4/24/06
Improvement Permit by: [signature] date 3/7/06
Authorization to Construct by: Judy Melville date 2-21-13

Installed by: Willie Christenbury
Operation Permit by: Maria Olson BS date 6/12/13
Existing System Inspection by _____ date _____

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