IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 108653 PIN# ~~4636 21 6368.7~~ 4636 21 5116 DATE Dec 13, 02

OWNER OR CONTRACTOR EASTER Development Company / Pride Homes PHONE: Business _____ Home _____

ADDRESS 227 Hilgenroy LANE Mooresville NC 28117

LOCATION Brawley Sch Rd TR Isle of Pines TR English Ivy on left ATEND

SUBDIVISION Stonegate BLOCK / SECTION _____ LOT 7 LOT AREA .71 Ac SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 1012 Date 7/26/04

Pump Tank: 1000 ✓ Gallons; PT 17 Date 12/3/04

Pump Make: Gould Model WE05111HH Serial No. S05826890

Nitrification Field: No Fields 1 Square Feet 1020 Linear Feet 340

No Lines 5 Trench Width 36" Max Trench Bottom Depth 20" ** Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: PM - Shallow 25% Reduction

Repair System Description: LPP / Other Pumped Alternative

Maintenance Agreement Required: ☐ Yes ☑ No, initially

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

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

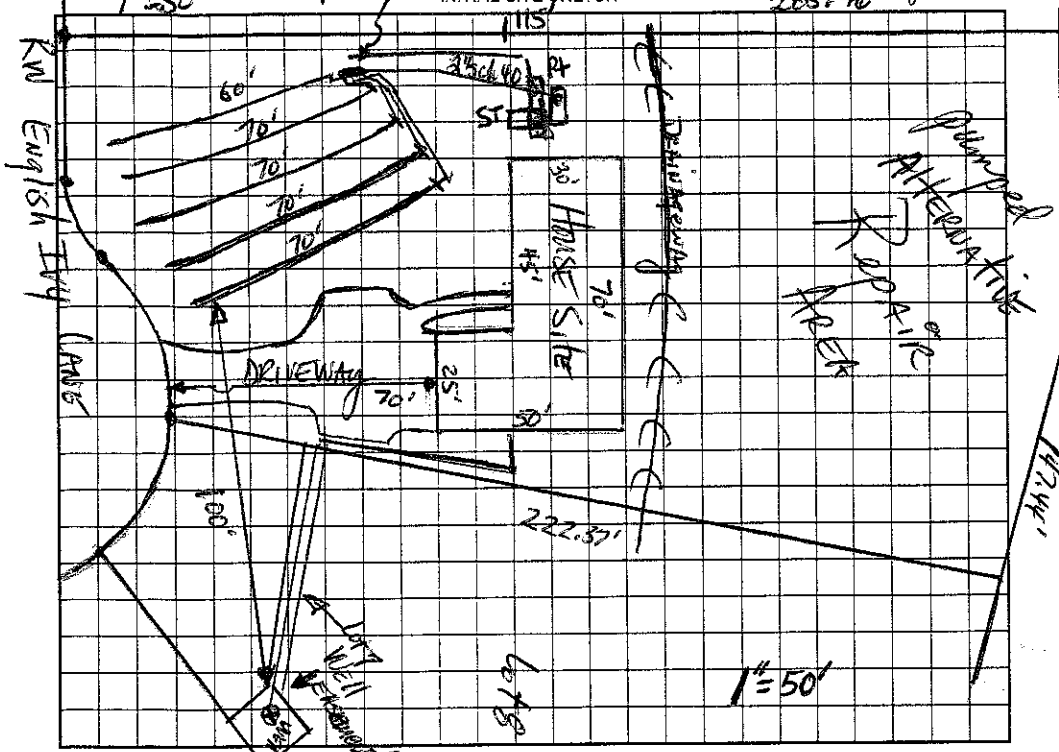
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: * offsite well EASEMENT Located on Lot 8

** INSTALLER NOTE MAXIMUM TRENCH bottom depth of 20". Bring in Additional Suitable cover soil AS NEEDED. Do NOT Cut AROUND 4" SCH 80 P.M. HOUSE SITE & BACKFILL Against crawl space AS NEEDED.

Comments:/Conditions: Reviewed Site plans & building plans 3/11/04 & essentially in Compliance with Original permit

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: _____ date 12-30-02 Installed by: C+S Grading

Improvement Permit by: _____ date 12-13-02 Operation Permit by: _____ date 5/25/05

Authorization to Construct by: _____ date 3/11/04 Existing System Inspection by: _____ date _____

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