IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12892308137988 PIN# 4636225027 DATE 10-16-07

OWNER OR APPLICANT Bradford Lee PHONE: Business 902-5684 Home 664-4553

ADDRESS 117 Mussel Ln Mooresville NC 28117

LOCATION Brawley School Rd TL Isle of Pines TR Teague Dr on left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 4.7994 acres SOIL CLASS. PS DESIGN FLOW 580g L.T.A.R. .3

Septic Tank: 1500 Gallons: STB 338 Date 5/11/07

Pump Tank: 1500 Gallons: PT 477 Date 9/11/07

Pump Make Gould 1/2HP Model PE5IM Serial No: _____

Nitrification Field: No Fields 1 Square Feet 1500' Linear Feet 500'

No Lines 4@125'ea Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: Pump - PM - 25% Reduction

Repair System Description: Pump 25-50% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☒ Other Accessory Bldg.

Water Supply: ☒ Individual ☐ Public ☐ Community

Gravel Depth N/A ☐ Gravity ☒ Pressure ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

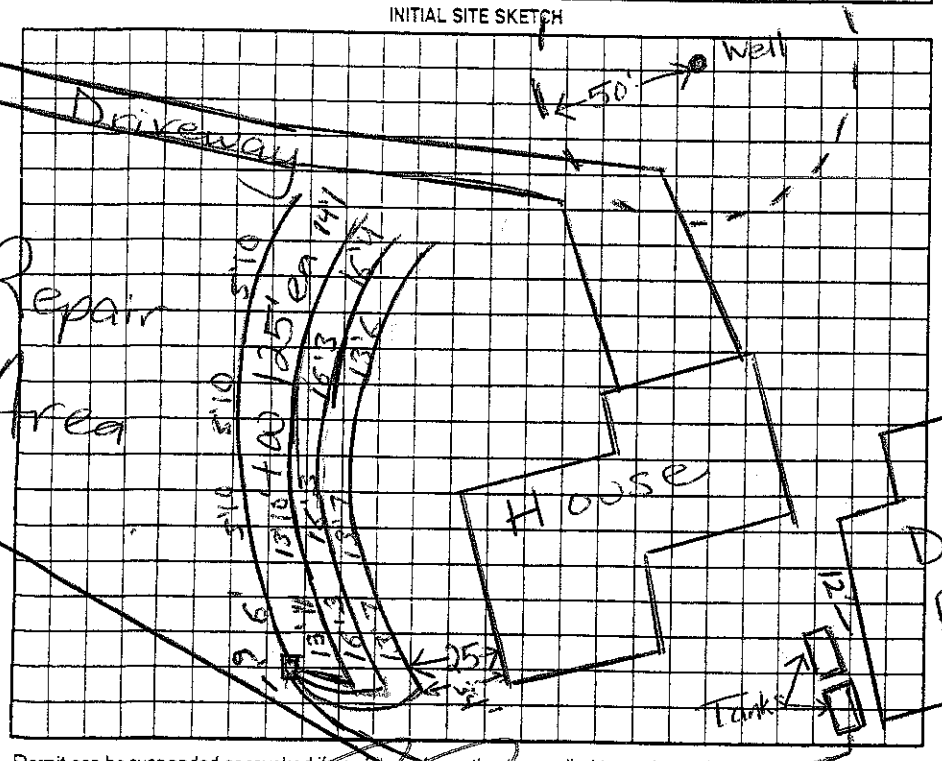
Scale 1:60'

Comments:/Conditions:

Note: Design Flow = 480g For 4 Bdrm plus 100 gal For "Accessory Bldg." = 580 gal

Replaces previous permits dated 9/5/06

INITIAL SITE SKETCH



AS BUILT SKETCH

System Installed as designed

All lines 125 linear feet Quick 4 In-9 Aerator

Well Installed on site

Pressure manifold & drainlines/Tanks & Pump Checked 10/18/07 AC

Electrical & Floats checked 10/25/07

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 10-17-07

Improvement Permit by: Marina M. Colson RS date 10/16/07

Authorization to Construct by: Marina M. Colson RS date 10/16/07

Installed by: Richard Abernathy

Operation Permit by: Anthony Cole Jr. date 2/25/08

Existing System Inspection by: _____ date _____

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