IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECT.

PERMIT# 122296 PIN# ~~4636-32-8692.048~~ 4636314882 DATE Oct 21, 04

OWNER OR CONTRACTOR Dieust Enterprises (PINE Isle LLC) PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr, Mooresville, NC 28117

LOCATION Brawley Sch Rd. TL Isle of Pines TL Isle Run Dr. 2nd lot on left

SUBDIVISION The Coves at Chumpkin Pt. BLOCK / SECTION _____ LOT 48 LOT AREA .69ac SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 312 Date 3-3-01
Pump Tank: 1000 Gallons; PT 283 Date 4-1-07
Pump Make: Myers Model ME50511 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 640/960 Linear Feet 320
No Lines 4 Trench Width 24" Max 8'oc Max Trench Bottom Depth 36" Gravel Depth NA

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

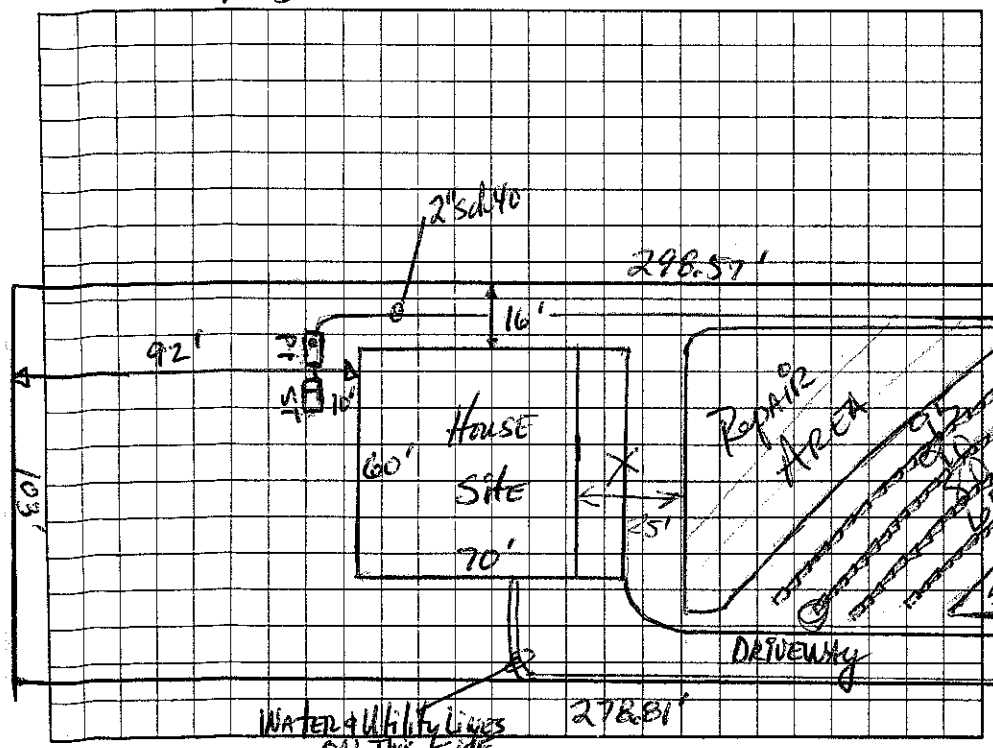
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms _____
☐ Business No. Employees _____
☐ Other _____
☐ Slab ~~☐ Crawl Space~~ ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ~~☐ Public~~ ~~☐ Community~~

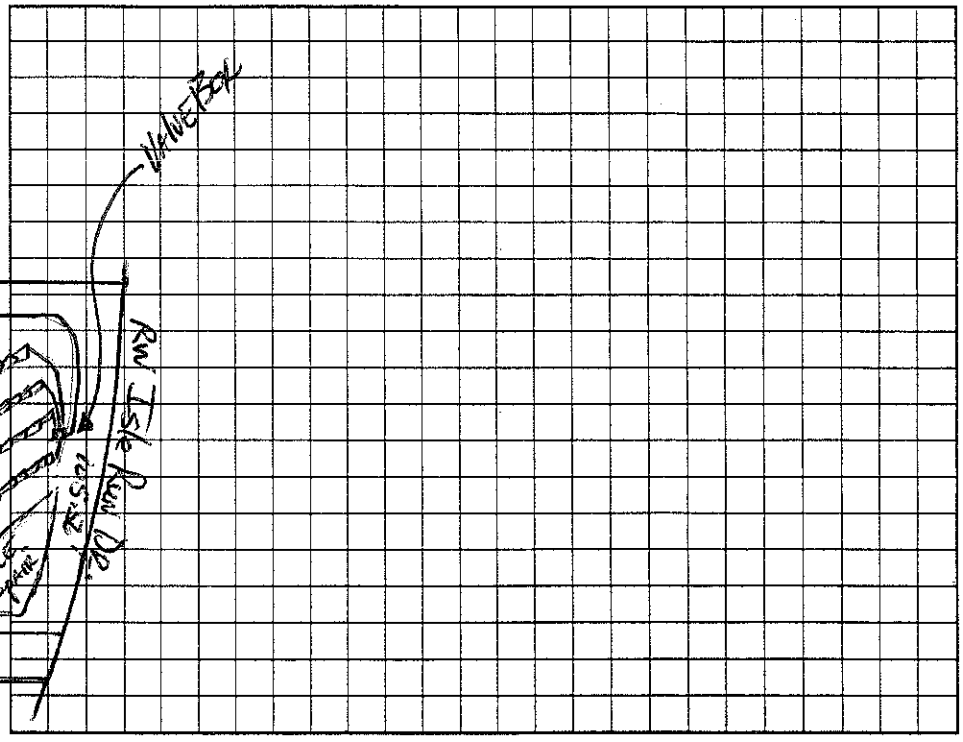
Comments:/Conditions: OR 36" Max 9'oc

Comments:/Conditions: move house back 12' from road
5/9/07 Checked lines, tanks & pressure

1"=50' 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: Tony Lee date 10-28-04 Installed by: Willie Christenbury

Improvement Permit by: D. Huffman IRS date 10-21-04 Operation Permit by: Wesley Sparks R.S. date 6/14/07

Authorization to Construct by: Judy Melville date 9-14-06 Existing System Inspection by: _____ date _____

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