IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 121286 PIN# ~~4636-32-6612.000~~ 4636318542.000 DATE Sept 28, 04

OWNER OR CONTRACTOR Pierce Enterprises (Pine Isle, LLC) PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr. Mooresville, NC 28117

LOCATION Brawley School Rd TL Isle of Pines TL Isle Run Dr. 6th lot on Right

SUBDIVISION The Cove at Champion Pt BLOCK / SECTION _____ LOT 6 LOT AREA .71ac SITE CLASS PS DESIGN FLOW 460gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 794 Date 2-20-07

Pump Tank: 1000 Gallons: PT 283 Date 2-19-07

Pump Make: Myers Model ME50SI Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: PM 25% Reduction

Repair System Description: LPP 25-50% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No initially

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms _____

☐ Business No. Employees _____

☐ Other _____

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

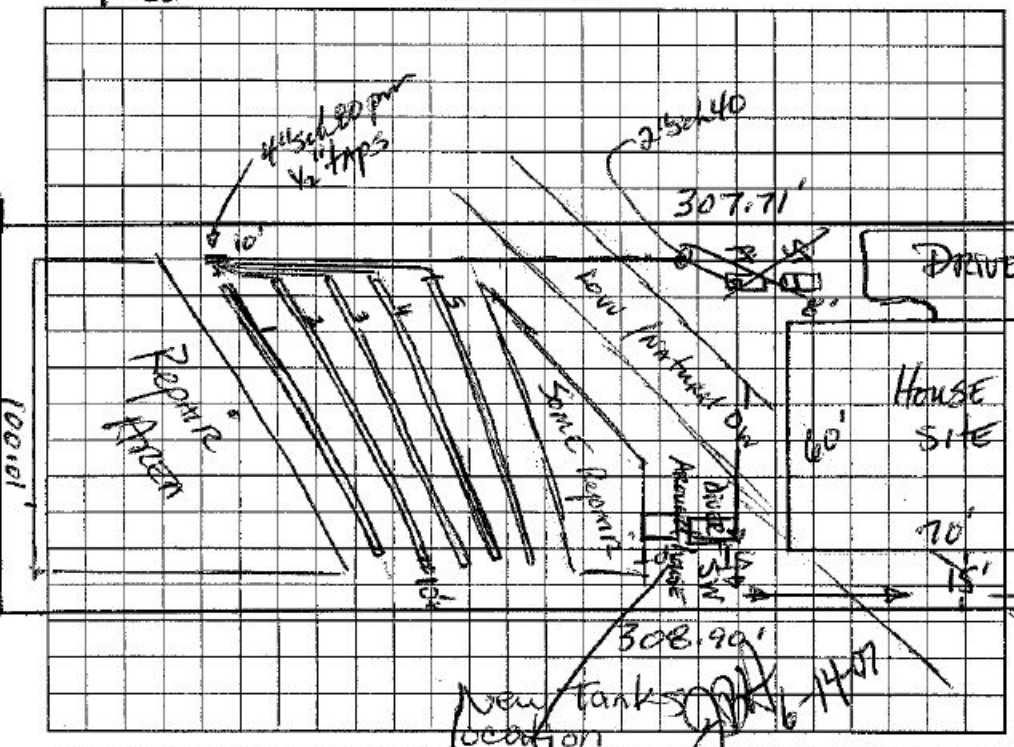
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions:

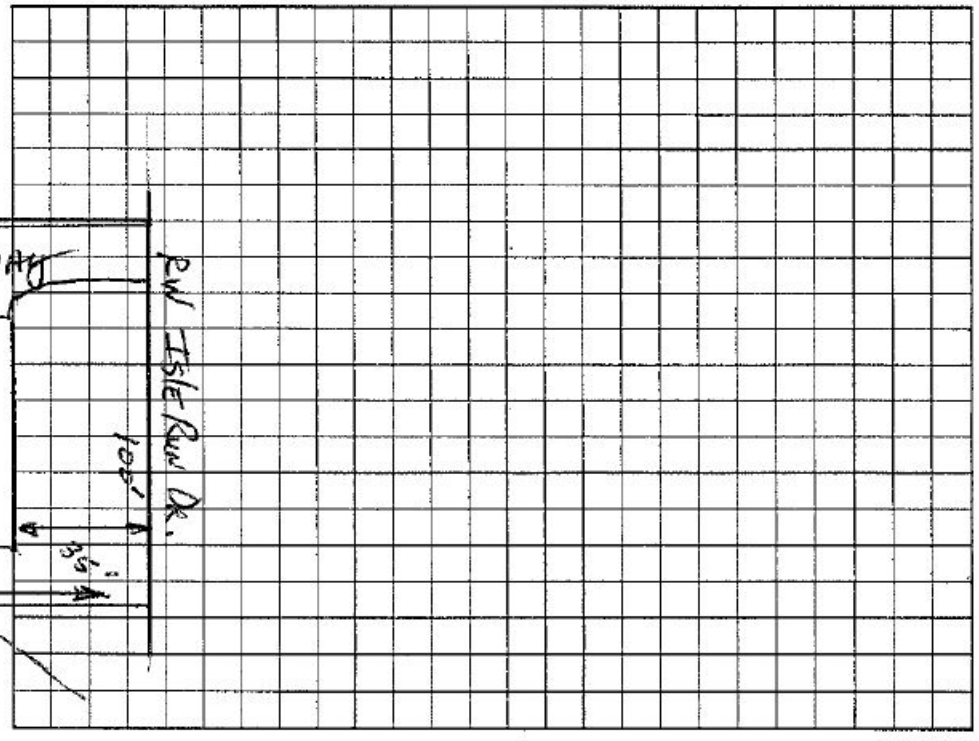
Comments/Conditions: 5/9/07 Checked tanks, lines & pressure Installed EZ Flow

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: R.B. Pierce date 10/28/07

Improvement Permit by: M Turner RS date 9-28-04

Authorization to Construct by: Wesley Sparks RS date 12/26/06

Installed by: Willie Christenbury

Operation Permit by: Mark Dixon date 6/14/07

Existing System Inspection by: _____ date _____

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