IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122254 PIN# 4636-32-8692,027 4636-32-6814 DATE Oct 8, 04

OWNER OR CONTRACTOR Drust Enterprises (~~Pine Isle LLC~~) ORLEANS PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr, Mooresville, NC 28117

LOCATION Brawley School Rd. TL Isle of Pines TL Isle Run Dr TL Preserve Way TL Estate View on Right

SUBDIVISION The Cove at Chesapeake Pt. BLOCK / SECTION _____ LOT 27 LOT AREA .98Ac SITE CLASS B DESIGN FLOW 460gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 313 Date 5-26-06
Pump Tank: 1000 Gallons; PT 283 Date 5-20-06
Pump Make: Myers Model ME 50 Serial No. _____
Nitrification Field: No fields 1 Square Feet 1440 Linear Feet 480
No Lines 4@120 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: pm/LF 25% Reduction
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☐ Other _____

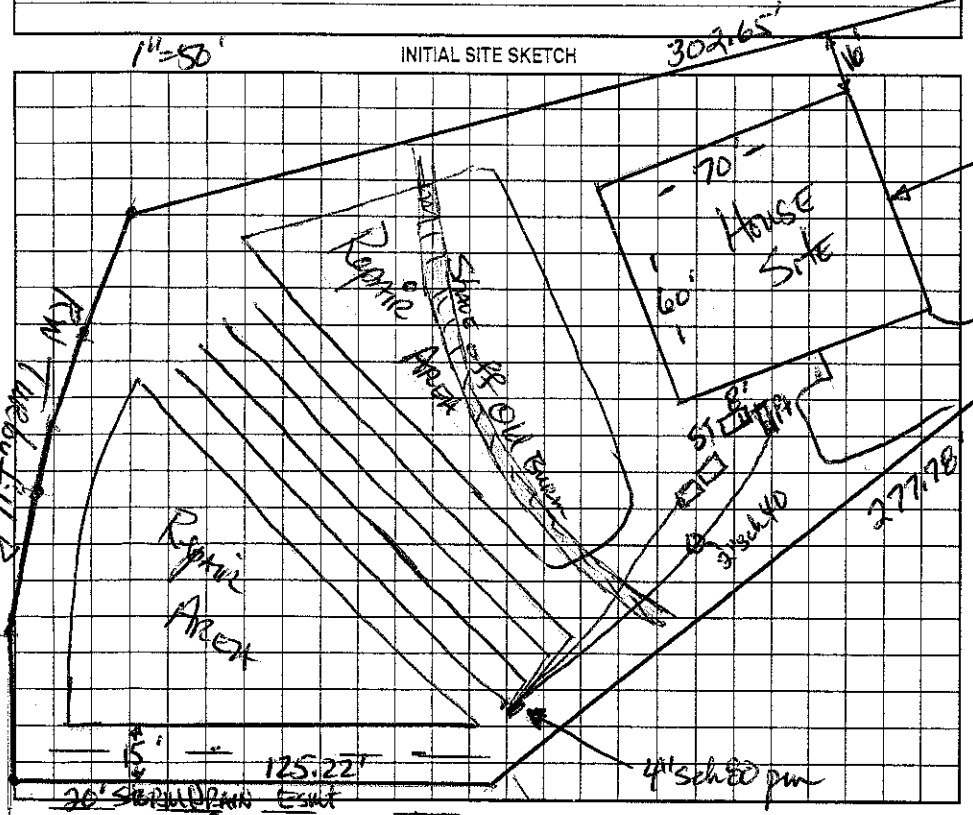
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

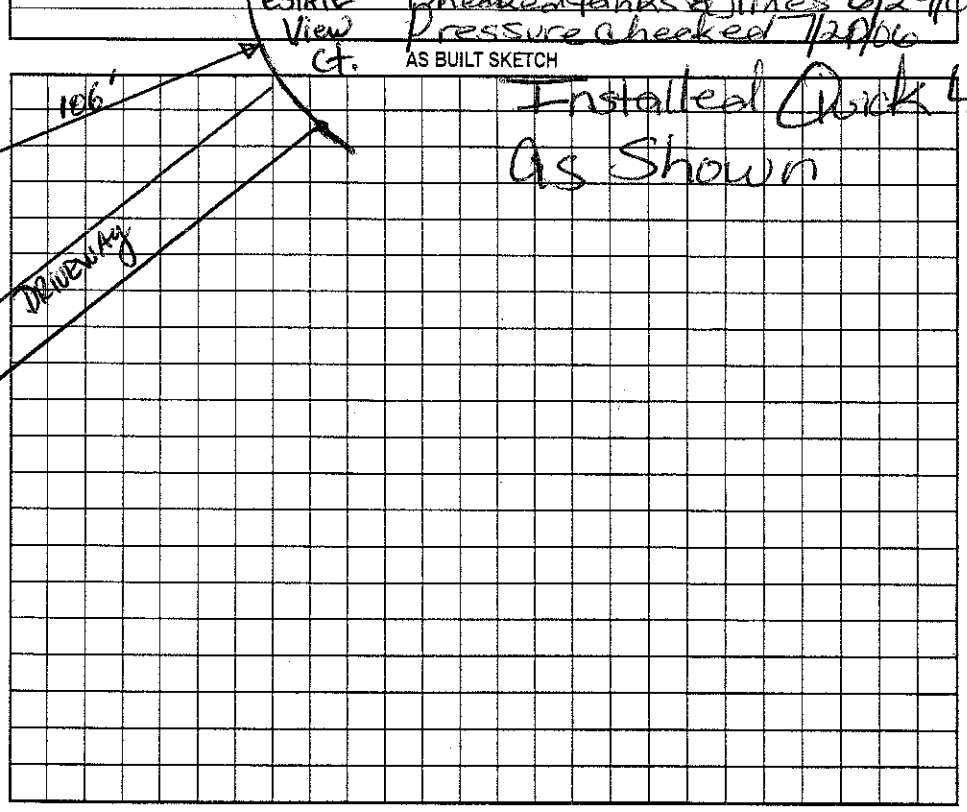
Comments:/Conditions:

Comments:/Conditions: ☆ See attached pool drawing
Checked tanks & lines 6/29/06
Pressure checked 7/27/06
Installed Quick 4 as shown

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 Hamm, RS date 10-8-04 Operation Permit by: Andy McNeill date 7-27-06

Authorization to Construct by: Wesley Sparks RS date 2/7/06 Existing System Inspection by: _____ date _____

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