IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12227 · PIN# ~~4636-32-8692.031~~ 4636328356.000 · DATE Oct. 13, 04

OWNER OR CONTRACTOR Diesel Enterprises (Pine Isle LLC.) / Robert · PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr Mooresville, NC 28117

LOCATION _____

SUBDIVISION The Cove at Chesapeake Pt · BLOCK / SECTION _____ · LOT 31 · LOT AREA .69 Ac · SITE CLASS PS · DESIGN FLOW 480 gpd · L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 8-1-05
Pump Tank: 1000 Gallons; PT 283 Date 8-1-05
Pump Make: Zoeller Model 152 Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 10"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: pm 25% Reduction
Repair System Description: LPPPBPS
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

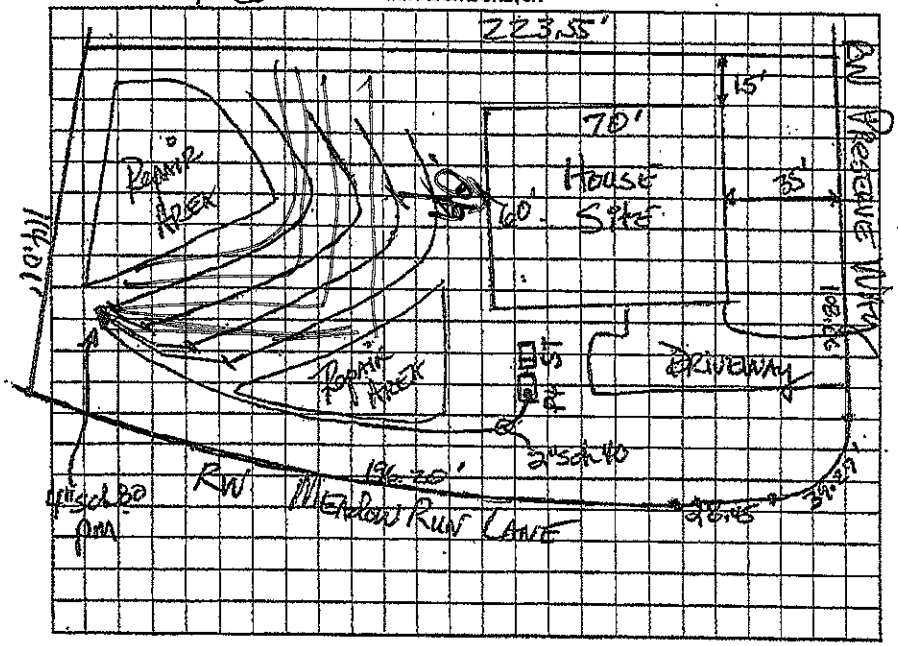
Comments/Conditions:

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Red Polylok filter, tank w/risers
Quick 4 chambers installed as initial
Site sketch 9/7/05 Jm

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

Electrical check by MJ

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 10.28.04 · Installed by: Willie Christenbury

Improvement Permit by: DRT Sumner, RS date 10-13-04 · Operation Permit by: _____ date 9/21/05

Authorization to Construct by: _____ RS date 2/28/05 · Existing System Inspection by: _____ date _____

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