IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 118527 PIN# 4636 36 2050 4636363035 DATE 3/16/04

OWNER OR CONTRACTOR R L Smith PHONE: Business 704-663-7223 Home

ADDRESS 130 Lugnut Ln. Mooresville, NC 28117

LOCATION 1100 TL Stutts Rd, TR FAST Ln. TL Lugnut Ln., next to last lot on R

SUBDIVISION Brawley Bus. Park BLOCK / SECTION LOT 18-18A LOT AREA .97AC SITE CLASS. PS DESIGN FLOW 150 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 794 Date 9-30-06
Pump Tank: 1000 Gallons; PT 27 Date 9-30-06
Pump Make: Myers Model ME50 052 Serial No.
Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240
No Lines 3@60' Trench Width 3' Max Trench Bottom Depth 3'

[X] New System [ ] Repair System Type: I, II, [III], IV, V, VI
System Description: Pres. Manifold - Type 3
Repair System Description: Same
Maintenance Agreement Required: [ ] Yes [X] No
Gravel Depth NA [X] Slab [ ] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

[ ] House/Mod. Home No. Bedrooms
[ ] Mobile Home No. Bathrooms
[X] Business No. Employees 6
[X] Other GARAGE - STORAGE

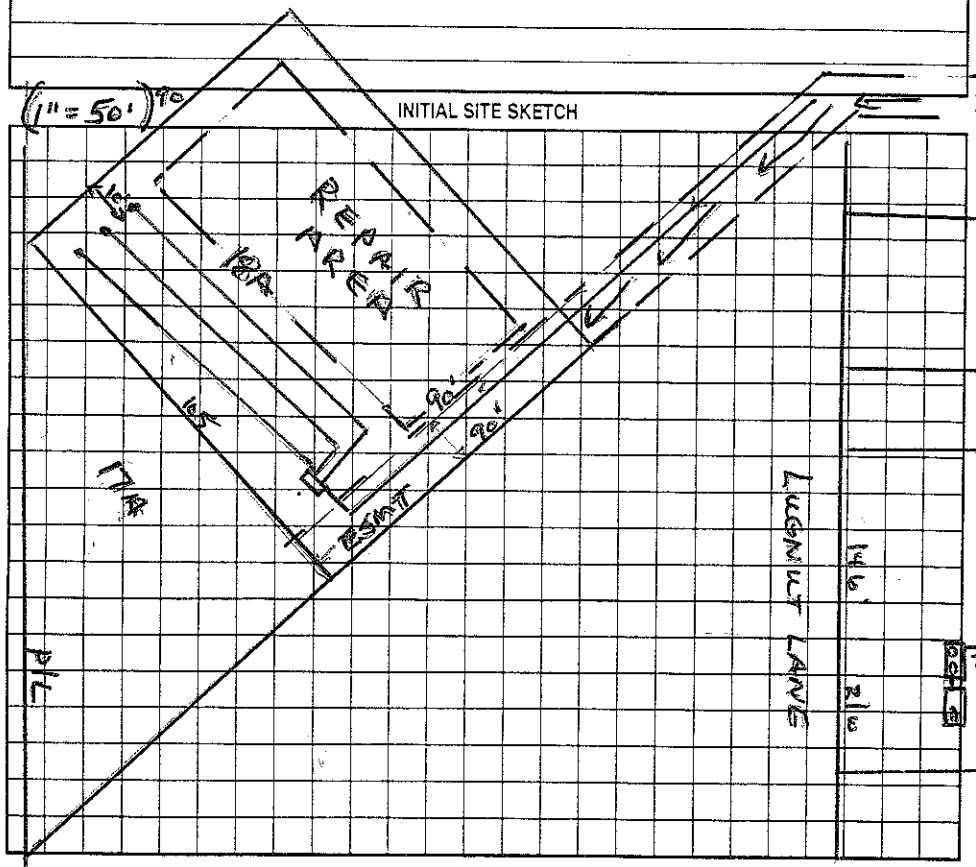
Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions:

Comments:/Conditions: Checked tanks 11/3/06 Checked EZ Flow lines 11/13/06 mlo

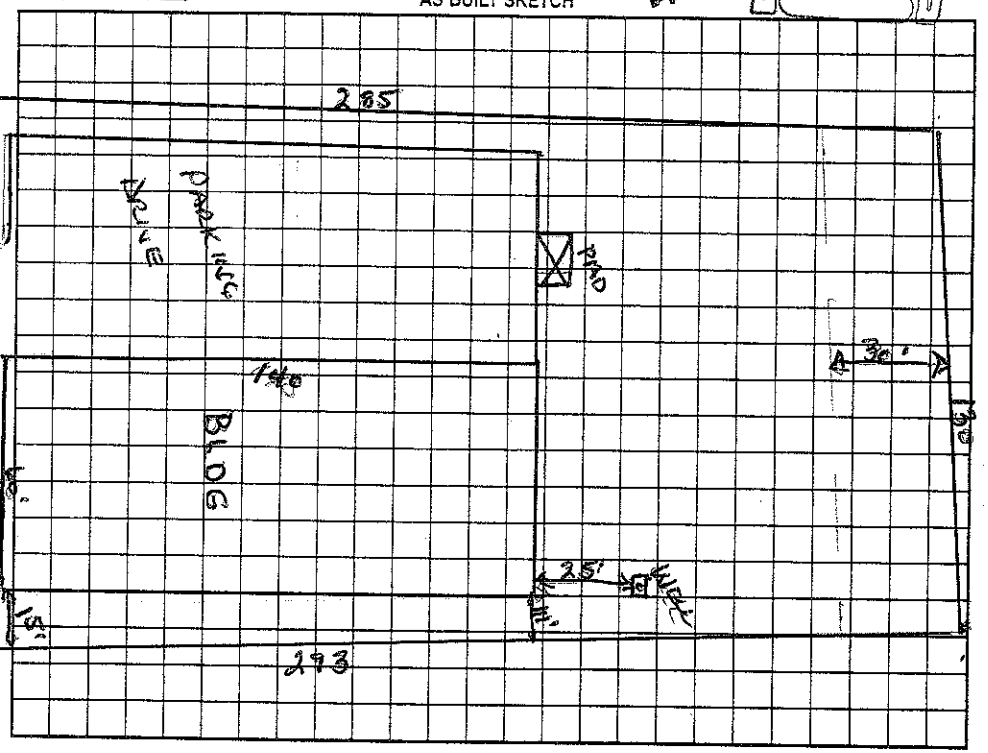
(1" = 50') N

INITIAL SITE SKETCH



AS BUILT SKETCH

ENTERED



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

Improvement Permit by: Wesley Sparks R.S. date 3/16/04

Authorization to Construct by: Wesley Sparks R.S. date 3/16/04

Installed by: R & T

Operation Permit by: Maria H Dotson RS date 11/12/07

Existing System Inspection by: date

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