IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12301 PIN# ~~4636-32-8693.014~~ 4636-42-1076 DATE Sept 30, 04

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

ADDRESS 125 Easton Dr, Mooresville, N.C. 28117

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

SUBDIVISION The Cove at Chesapeake II BLOCK / SECTION _____ LOT 14 LOT AREA .71Ac SITE CLASS P5 DESIGN FLOW 480 gpd L.T.A.R. .63

Septic Tank: 1000 Gallons; STB 312 Date 9-20-06

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 2 Square Feet 1200 Linear Feet 400

No Lines 3+3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: Gravity 25% Reduction

Repair System Description: LP 25-50% Reduction

Maintenance Agreement Required: ☐ Yes ☑ ~~No~~ Initially

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms ____ No. Employees ____

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

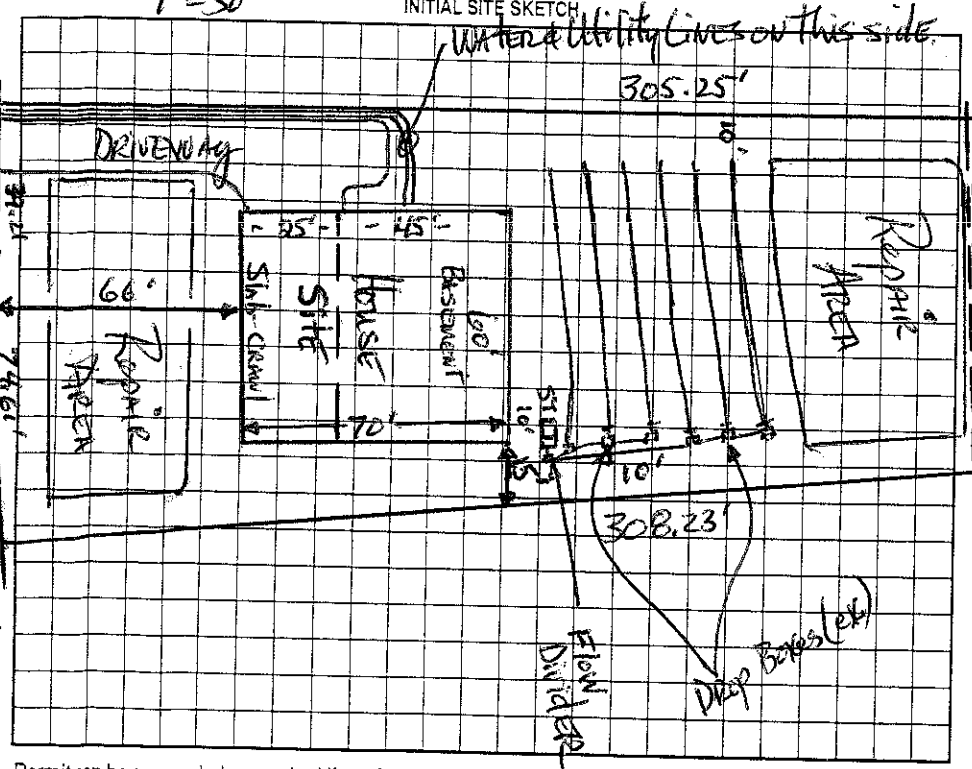
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: 200' of Lateral minimum off each side of flow divider.

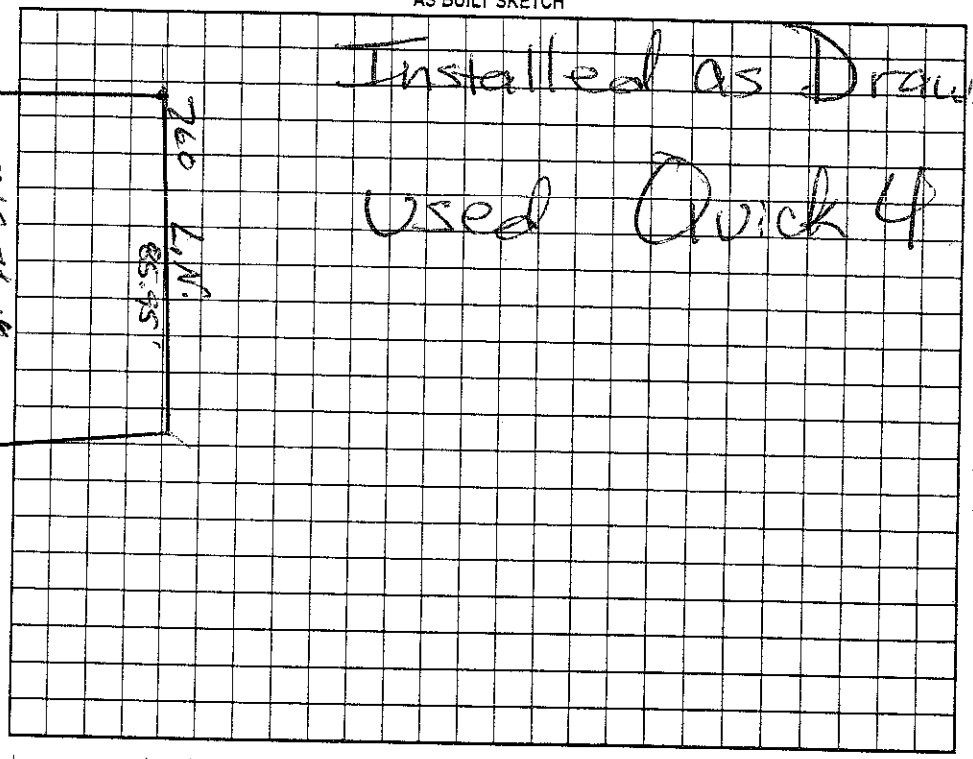
Comments/Conditions: Pipe Blocked (Partial) Checked 4 of 6 lines Checked Tank 10/3/06

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. D. Dicus date 10/18/06

Improvement Permit by: D. Hanson RS date 9-30-04

Authorization to Construct by: Wesley Sparks RS date 7/19/06

Installed by: Willie Chastenburg

Operation Permit by: Mariah H. Dotson date 11/1/06

Existing System Inspection by: _____ date _____

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