IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 121305 PIN# ~~4636-32-8692.000~~ 4636-42-1365 DATE Oct 1, 04

OWNER OR CONTRACTOR Diewst Enterprises (Pine Isle, LLC) / J.B. Hamer PHONE: Business _____ Home _____

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

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

SUBDIVISION The Great Chesapeake Pt. BLOCK / SECTION _____ LOT 17 LOT AREA .72Ac SITE CLASS. PS DESIGN FLOW 440gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 744 Date 2/16/07
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 2 Square Feet 1600 Linear Feet 534
No Lines 4+4 Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity Conventional
Repair System Description: 1 LPPBPS
Maintenance Agreement Required: ☐ Yes ☑ No initially

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

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

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

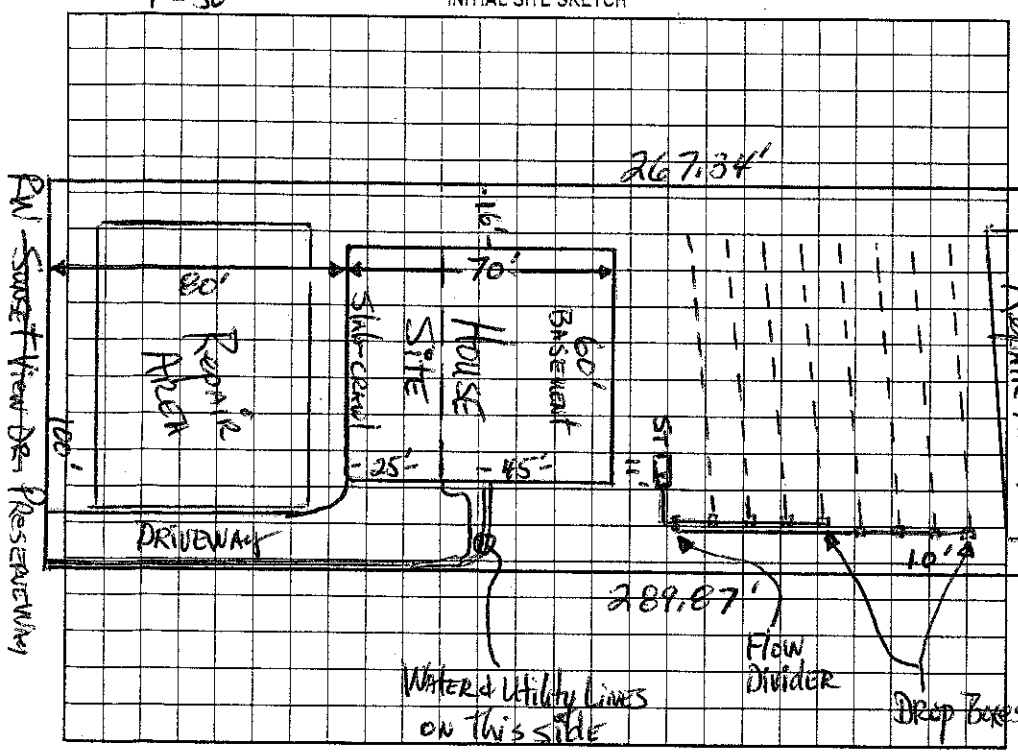
Gravel Depth 12"

Comments:/Conditions: 3/20/07 Spoke with Installer, Okay to switch to 25% Reduction.

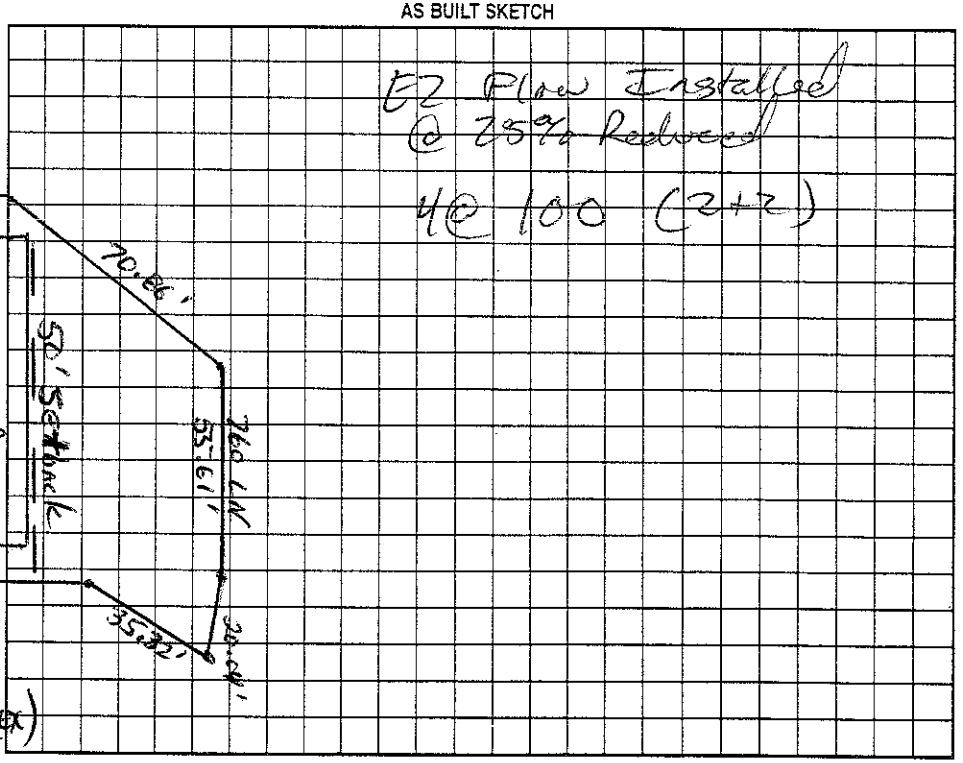
Comments:/Conditions: (potential)

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. Hamer date 10/28/04 Installed by: Willie Christenbury

Improvement Permit by: D. Thompson, RS date 10-1-04 Operation Permit by: John E. Allen date 3/28/07

Authorization to Construct by: RS date 8/22/06 Existing System Inspection by: _____ date _____

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