IREDELL COUNTY HEALTH DEPARTMENT

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

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

2:00

PERMIT# 12131 PIN# ~~4636-32-8692.021~~ 4636 42 1747 DATE Oct 7, 04

OWNER OR CONTRACTOR Dienst Enterprises (Pine Isle, LLC)/Orlec 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 on Right near end

SUBDIVISION The Crest at Chesapeake Pt. BLOCK / SECTION _____ LOT 21 LOT AREA ±.76 Ac SITE CLASS. PS DESIGN FLOW 440gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 312 Date 3-16-06
Pump Tank: 1000 Gallons; PT 283 Date 3-10-07
Pump Make: Goulds Model WE0.712H Serial No. _____
Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270
No Lines 4 Trench Width 24"min 36"max Max Trench Bottom Depth 36" Gravel Depth N/A

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

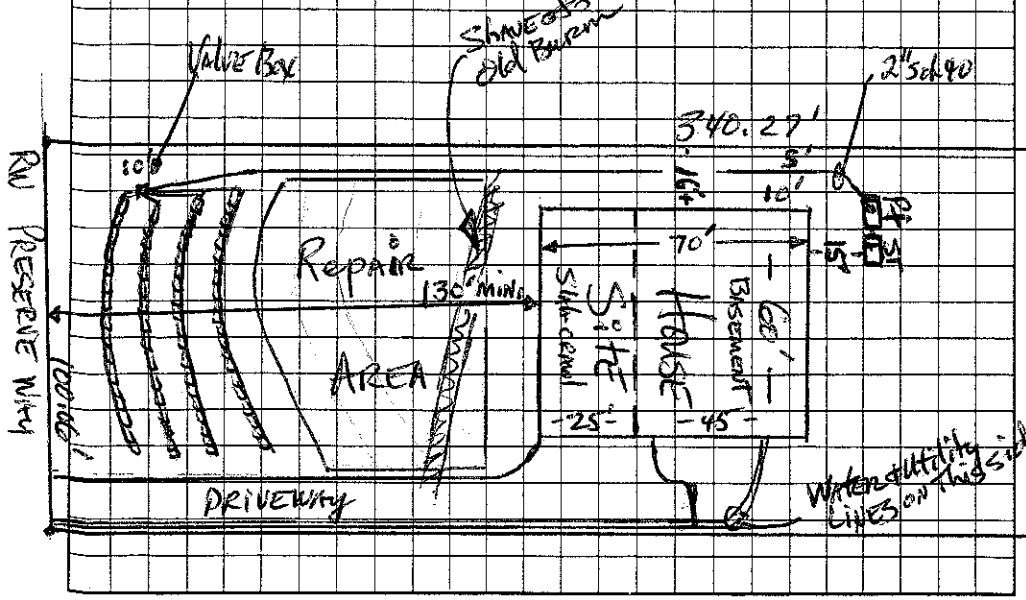
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments/Conditions: OR 36" max 9'oc

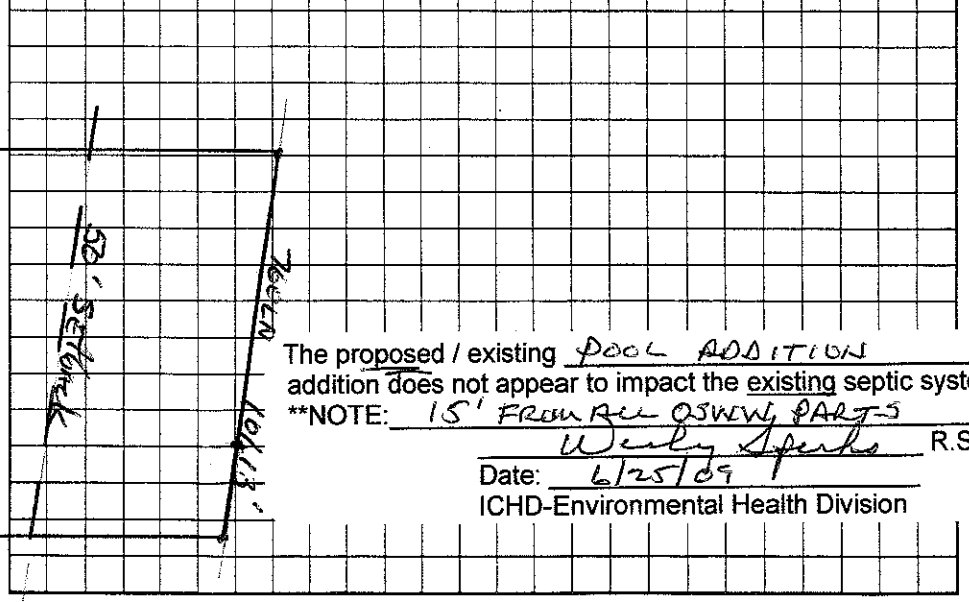
Comments/Conditions: (partial) 4/22/08 Checked tanks & lines
4/28/08 Set 2ft pressure head (no pressure set)

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH



The proposed / existing POOL ADDITION addition does not appear to impact the existing septic system.
**NOTE: 15' FROM ALL OSWW PARTS

Willy Sparks R.S.
Date: 6/25/09
ICHD-Environmental Health Division

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. Dienst date 10/28/04
Improvement Permit by: D. Altman, RS date 10-7-04
Authorization to Construct by: Cindy Metcalf date 4-13-07

Installed by: Willie Christenbury LPS
Operation Permit by: Maria H. Tolson RS date 6/10/08
Existing System Inspection by: _____ date _____

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