IREDELL COUNTY HEALTH DEPARTMENT

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

130.00 Paid

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

PERMIT# 126417 PIN# 4636526515 DATE 2-24-05

OWNER OR CONTRACTOR Robert Yaniero PHONE: Business 664-7000 ext 311 Home 660-1947

ADDRESS 136 Vance Crescent Drive Mooresville, NC 28117

LOCATION Brawley School Rd. TL Stutts Rd on right just past Poinsetta Drive

SUBDIVISION Stutts Cove BLOCK / SECTION ____ LOT 4 LOT AREA .72 Acre SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3

Gravity with

Septic Tank: 1000 Gallons; STB 1100 Date 6-16-04

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI

System Description: Gravity - 25% Reduction

Repair System Description: Pump - LP - Panel Blk

Maintenance Agreement Required: [ ] Yes [X] No Not Initially

[X] House/Mod. Home No. Bedrooms 4

[ ] Mobile Home No. Bathrooms 3.5

[ ] Business No. Employees ____

[ ] Other ____

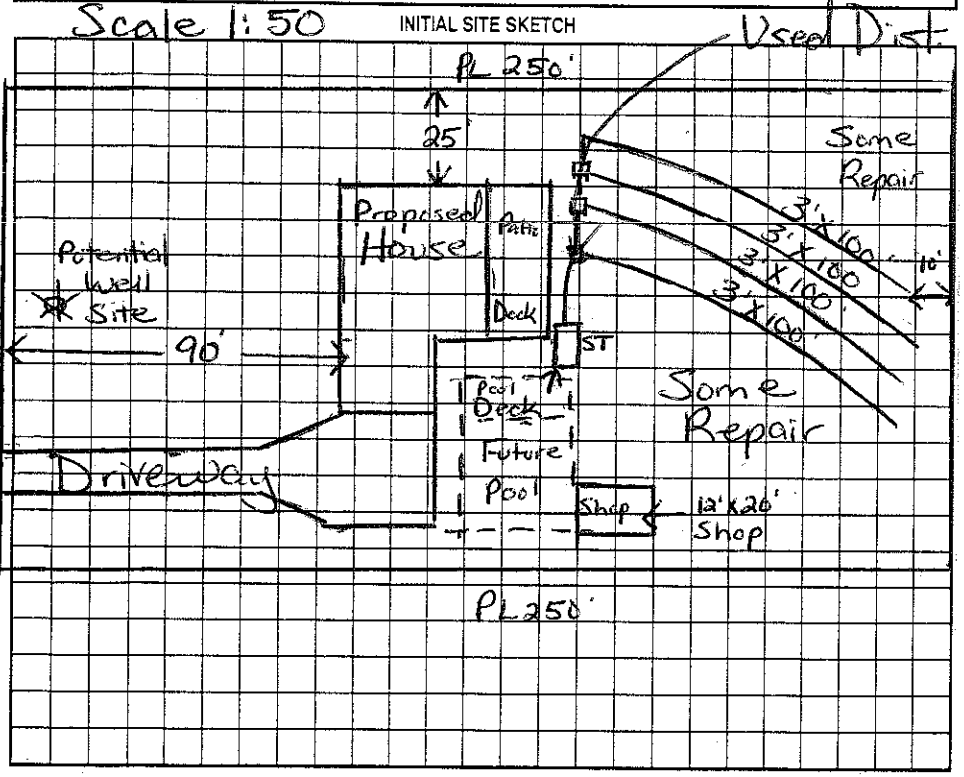
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

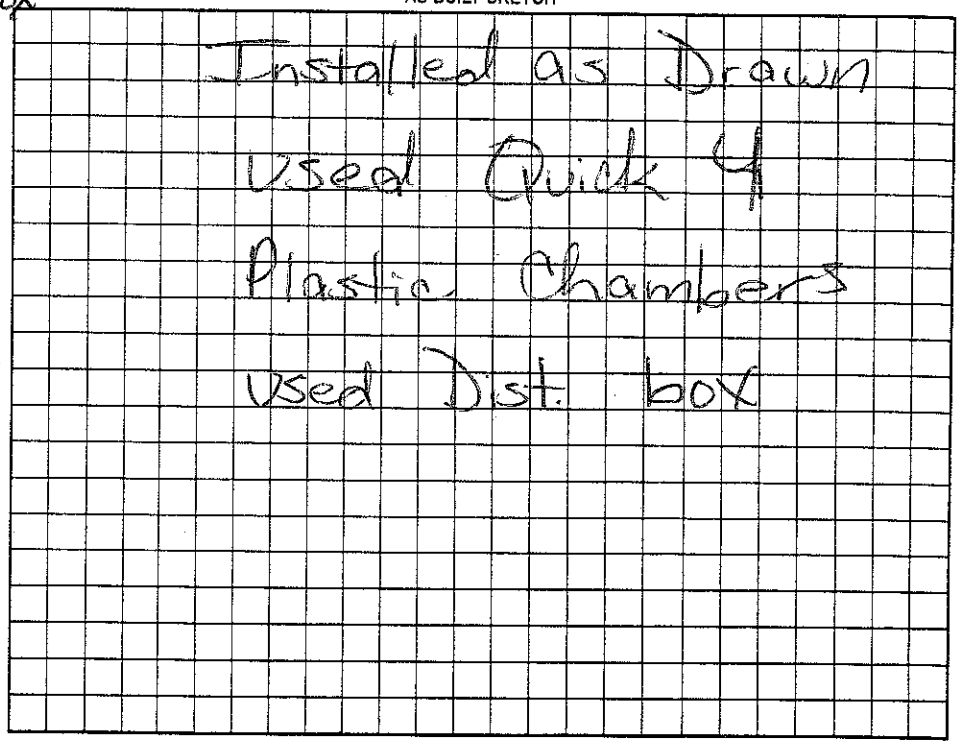
Comments:/Conditions: Remove any old berms or terraces. Keep Septic System at least 10' from PL @ 100' to well. Okay to use Distribution box or "drop boxes".

Comments:/Conditions: Any future pool must be 15' from Septic System and Repair Area. (Pool deck can be closer than 15ft.)

Scale 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: [signature] date 2/25/05 Installed by: Umbarger Backhoe

Improvement Permit by: Maria H. Dotson RS date 2/24/05 Operation Permit by: Maria H. Dotson RS date 8/29/05

Authorization to Construct by: Maria H. Dotson RS date 2/24/05 Existing System Inspection by: ____ date ____

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