IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 $288 MOORESVILLE 704-664-5281 4:00

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

PERMIT# 108826 PIN# 4637.30-8890 DATE 3/21/03

OWNER OR CONTRACTOR Terry Moore / Nelson Dellinger PHONE: Business _____ Home _____

ADDRESS 125 Grace Lynn Drive

LOCATION Brawley School Rd. TR Blume Rd TR Patternote at end #325

SUBDIVISION C L & T J BLOCK / SECTION 9 LOT 184 LOT AREA .92 Acre SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3-.35

Septic Tank: 1000 Gallons; STB 794 Date 3-22-03
Pump Tank: 1000 Gallons; PT 27 Date 3-2-03
Pump Make: Zoeller Model .4HP N152A Serial No. PN1520003
Nitrification Field: No Fields 1 Square Feet 1050 Linear Feet 350'
No Lines 6 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: Pump-25% Reduction
Repair System Description: Pump-LP-Panel Blk
Maintenance Agreement Required: ☐ Yes X No Not Initially

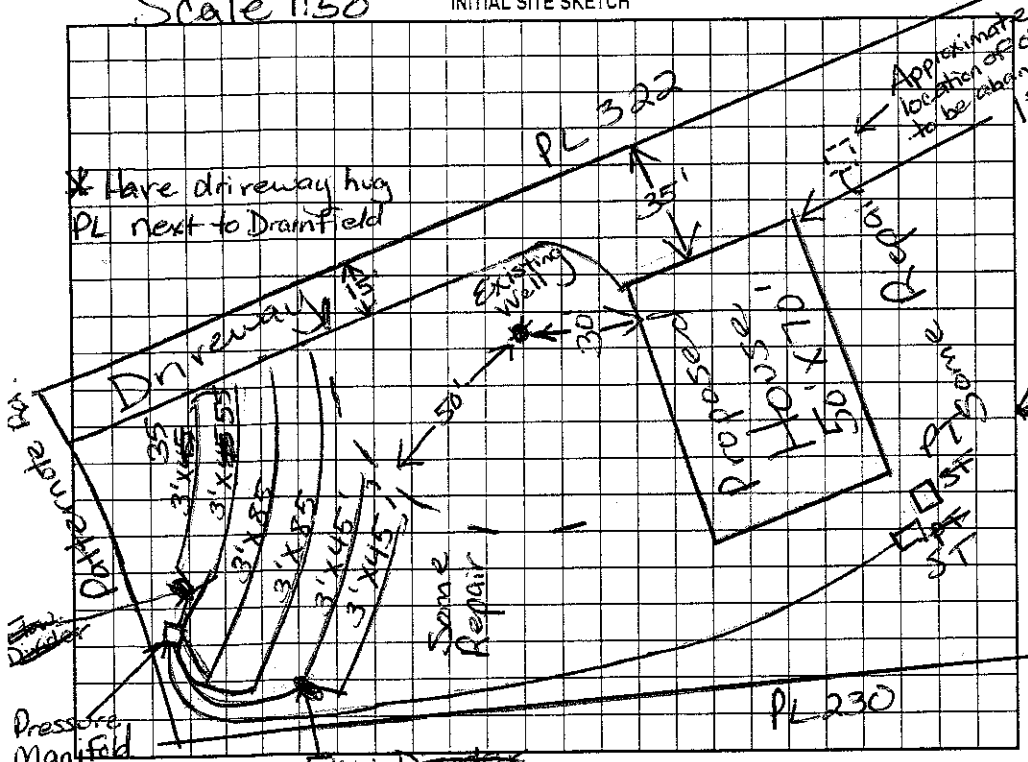
X House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☐ Crawl Space X Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: X Individual Exist. ☐ Public ☐ Community

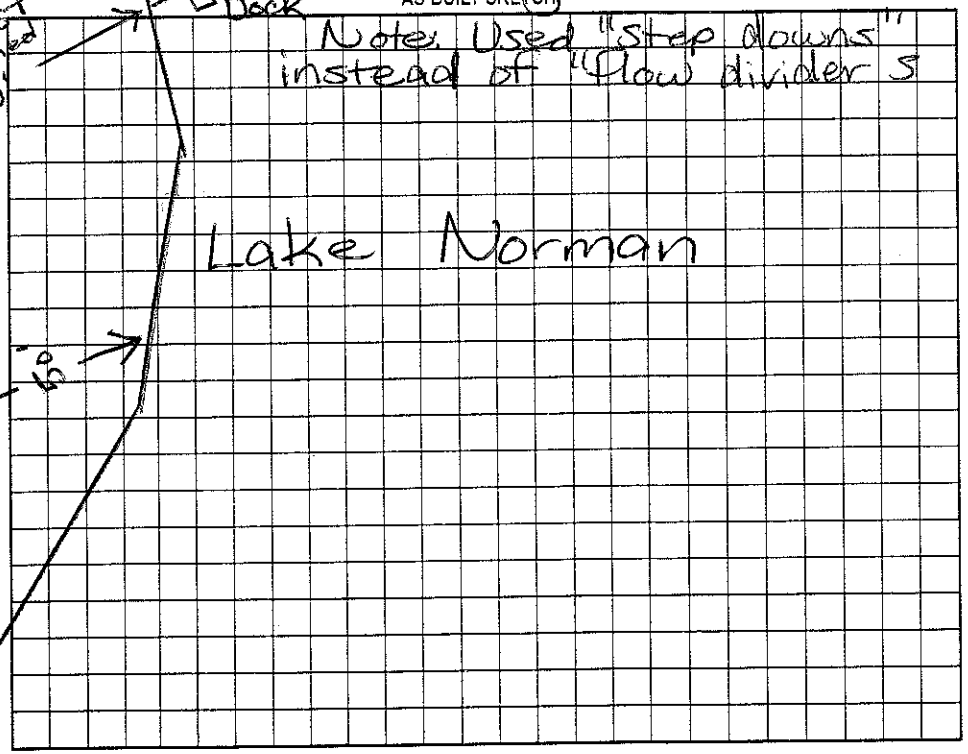
Comments:/Conditions: Keep Septic System at least 10' to PL, 50' to lake & 50' to any well. (Upper & lower lines go to Flow Divider then short lines)

Comments:/Conditions: Note: "Properly" abandon existing Septic tank (ST) per building codes. Some repair lines can go between old drainlines. Grey filter

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: Nelson Dellinger date _____ Installed by: Charles Beaty LRS

Improvement Permit by: Maria H. Dobson RS date 3/21/03 Operation Permit by: Maria H. Dobson date 9/23/03

Authorization to Construct by: Maria H. Dobson RS date 3/21/03 Existing System Inspection by: _____ date _____

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