IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 315.00 Paid MOORESVILLE 704-664-5281 2:30

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

PERMIT# 116878 PIN# 4638069934 DATE 12-16-03

OWNER OR CONTRACTOR John Sutton PHONE: Business 863 534-5254 Home 361-3881 John

ADDRESS 5525 Summerland Hills Drive Lakeland FL 33813

LOCATION Hwy 150 TR Perth Rd (North) TL Fern Hill TL Broadview Circle lot on left #169

SUBDIVISION Clark T BLOCK / SECTION 15 LOT 89 LOT AREA .69 Acres SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 11-5-03 ☒ New System ☐ Repair System Type: I, II, III, (IV), V, VI

Pump Tank: 1000 Gallons; PT 27 Date 11-6-03 System Description: Pump-LP-Panel Block

Pump Make: ____ Model ____ Serial No. ____ Repair System Description: Same

Nitrification Field: No Fields 1 Square Feet 810' Linear Feet 270' Maintenance Agreement Required: ☒ Yes ☐ No

No Lines 3@90' Trench Width 24"-36" Max Trench Bottom Depth 30" Gravel Depth N/A ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4.5

☐ Business No. Employees ____

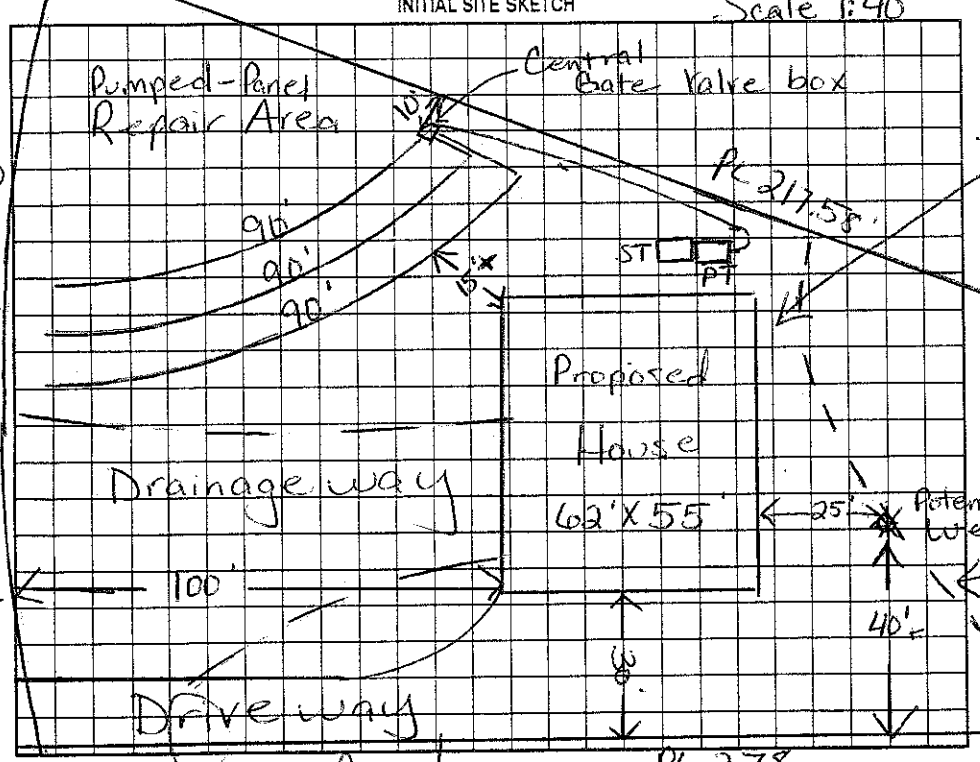
☐ Other ____

Water Supply: ☒ Individual ☐ Public ☐ Community

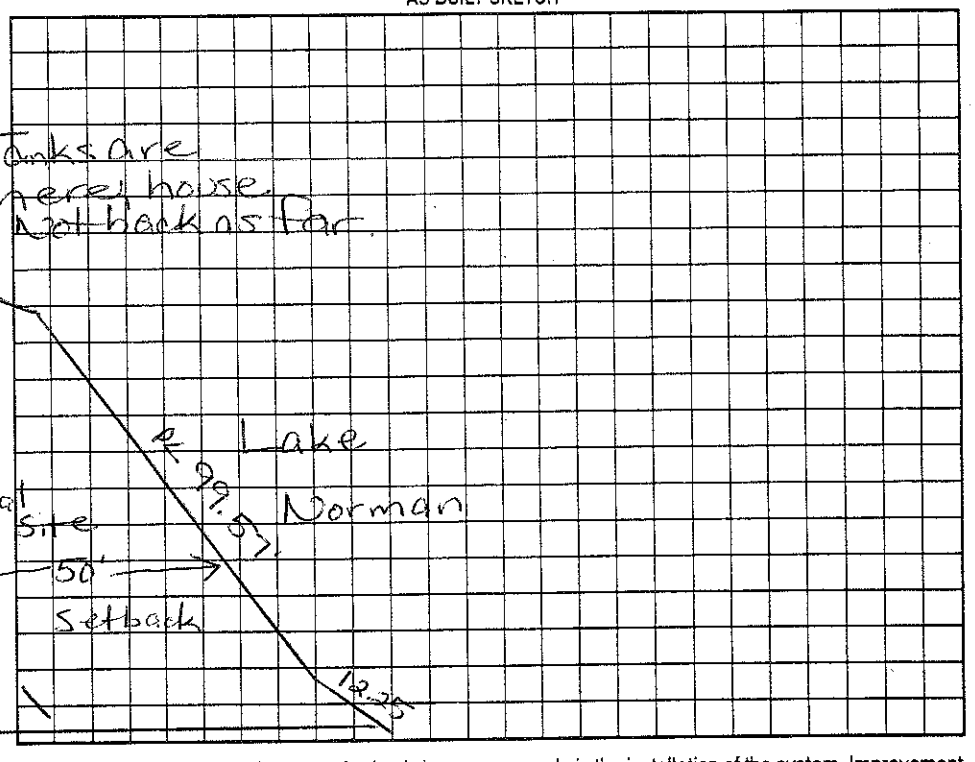
Comments:/Conditions: Keep Septic System at least 10' from PL, 50' from lake & 50' from any well.

Comments:/Conditions: Note: Keep drainlines lower than foundation drain around house. Check tanks & lines 12/21/05 Pres, elect & alarm 1/4/06 mh

INITIAL SITE SKETCH Scale 1:40'



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: ____ date 12-29-03 Installed by: K & H

Improvement Permit by: Maria H Dotson RS date 12/16/03 Operation Permit by: Maria H Dotson RS date 1/4/06

Authorization to Construct by: Maria H Dotson RS date 12/16/03 Existing System Inspection by: ____ date ____

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