$800 4.00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 134285 PIN# 4638191413 DATE 5-30-06

OWNER OR APPLICANT Mack Mozeley PHONE: Business ______ Home 634-2899

ADDRESS 122 Bridlewood Dr. Mooresville, NC 28115

LOCATION Perth Rd TR Fern Hill TR Bridlewood 2nd lot on right

SUBDIVISION Cla T BLOCK / SECTION 15 LOT 137 LOT AREA .91 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .035

Septic Tank: 1000 Gallons; STB 1607 Date 6/23/06
Pump Tank: 1000 Gallons; PT 274 Date 6/12/06
Pump Make: Little Giant Model 9EH Serial No. ______
Nitrification Field: No Fields 1 Square Feet 780 Linear Feet 260'
No Lines 4@ 65 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: Pump-PM-25% Reduction
Repair System Description: Pump-LP-Panel Block
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Gravity ☒ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

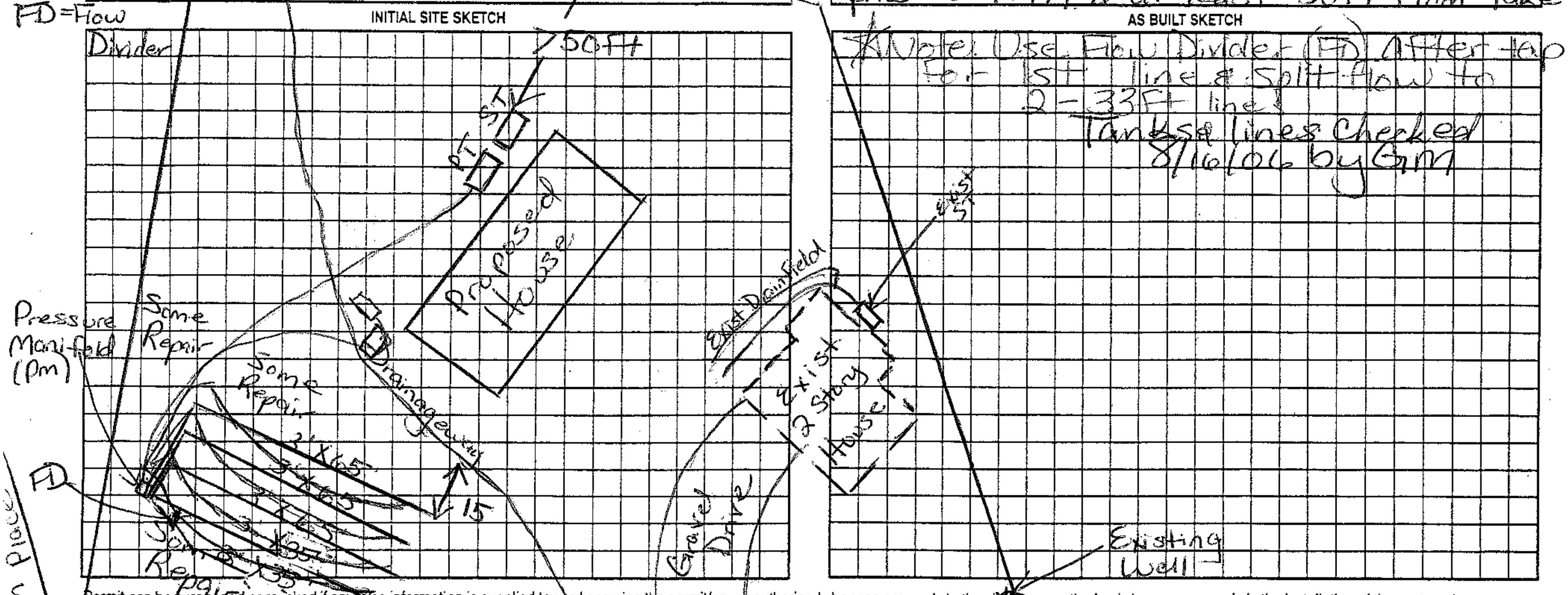
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other ______
No. Bedrooms 3 No. Persons ______ No. Employees ______

Water Supply: ☒ Individual (Exist.) ☐ Public ☐ Community

Comments:/Conditions:

Comments:/Conditions: * Save all remaining areas for Future Repair, Stay 100Ft from well. Stay at least 5Ft from PL (Lot deeded/platted prior to 1977) & at least 50ft from lake

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 6/1/06 — Bridlewood Drive — Installed by: [signature]

Improvement Permit by: Maria H. Dolson RS date 5/30/06 Operation Permit by: Maria H. Dolson RS date 9/15/06

Authorization to Construct by: Maria H. Dolson RS date 5/30/06 Existing System Inspection by: ______ date ______

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