# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 / 130.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 120414 PIN# 4638 33 1388 DATE 5/13/04

OWNER OR CONTRACTOR Tracy Adams PHONE: Business 764-660-5061 Home

ADDRESS 830 Big Studion Lp. Mooresville, NC. 28117

LOCATION Perth N off 150 W to Normandy Rd. on L before cul de sac

SUBDIVISION Normandy Hills BLOCK / SECTION LOT 7 LOT AREA .70 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 7818 Date 5/12/04
Pump Tank: 1000 Gallons; PT 19 Date 5/28/04
Pump Make: Bowles Model WES SII H Serial No. NOV5877
Nitrification Field: No Fields 1 Square Feet 900 * Linear Feet 300 *
No Lines 3@100' Trench Width 3 Max Trench Bottom Depth 3' Gravel Depth No

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: PressMan to Type 3 Drainfield
Repair System Description: Same Type
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 3
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

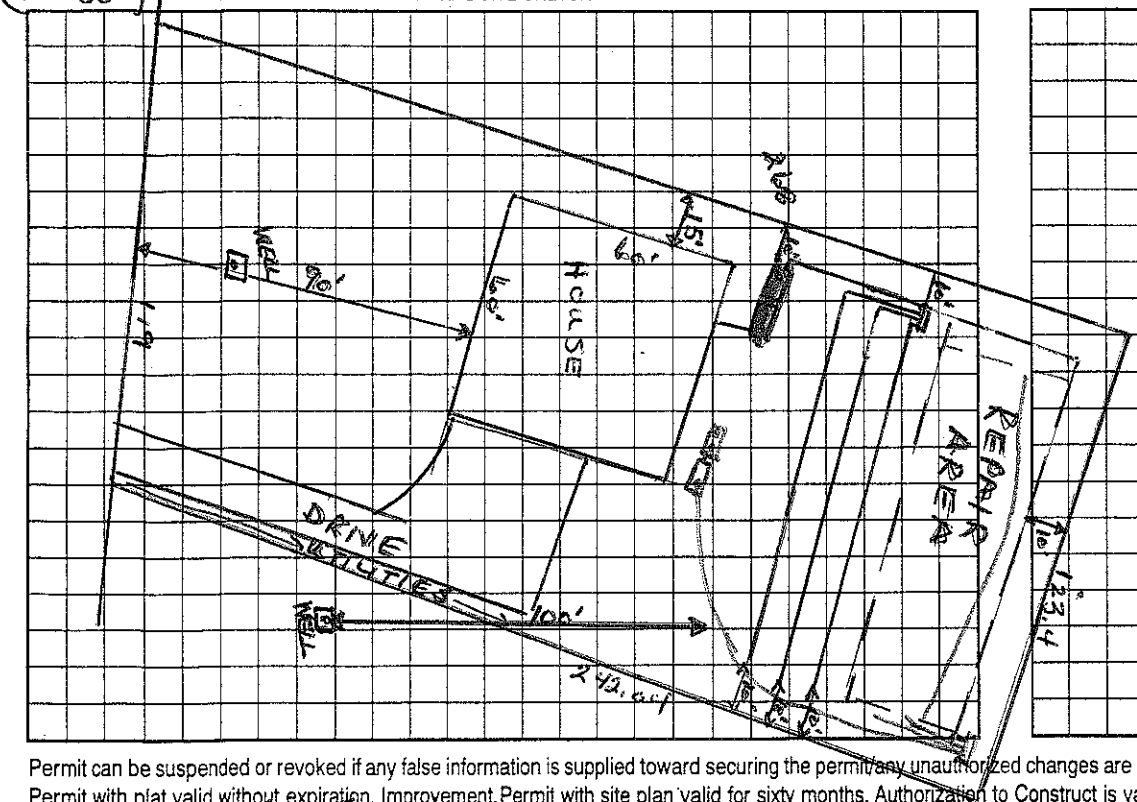
Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions:

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(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: * Mitchell Pride Homes date 5-14-04
Improvement Permit by: Wesley Sparks R.S. date 5/13/04
Authorization to Construct by: Wesley Sparks R.S. date 5/13/04

Installed by: C+S Backhoe
Operation Permit by: Wesley Sparks R.S. date 11/12/04
Existing System Inspection by: date

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