IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 70[illegible]578-5305 50.00 Paid MOORESVILLE 704-664-5[illegible]

CALLED IN 12/10/03 AM

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPE[illegible]ATION PERMIT / EXISTING SYSTEM I[illegible]PECTION

PERMIT# 105 621 PIN# ~~4638 57 4629~~ 4638 57 4728 DATE 2/18/03

OWNER OR CONTRACTOR Wm. Green PHONE: Business _____ Home 704-662-0109

ADDRESS 208 Tillery Mooresville, NC. 28115 / 109 FOLKSTONE RD.

LOCATION Perth & TL Collingswood TR Folkstone corner lot on (L)

SUBDIVISION Hunstman BLOCK / SECTION _____ LOT 3 LOT AREA ~2AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 525 Date 10/11/03

Pump Tank: 1000 Gallons; P[illegible] 702 Date 5/9/03 Coll

Pump Make: Zoeller Model _____ Serial No. _____

Nitrification Field: No. Units 1 Square Feet 532 - 798 Linear Feet 266

No. Lines 5 or 7 Trench Width 2-3 Max Trench Bottom Depth 36 Gravel Depth N/A

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

System Description: Pres Dosed - 16" PPBPS

Repair System Description: RD SAME

Maintenance Agreement Required: ☐ Yes ☐ No

X House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

☐ Slab ☐ Crawl Space X Basement w/plumbing ☐ Basement wo/plumbing

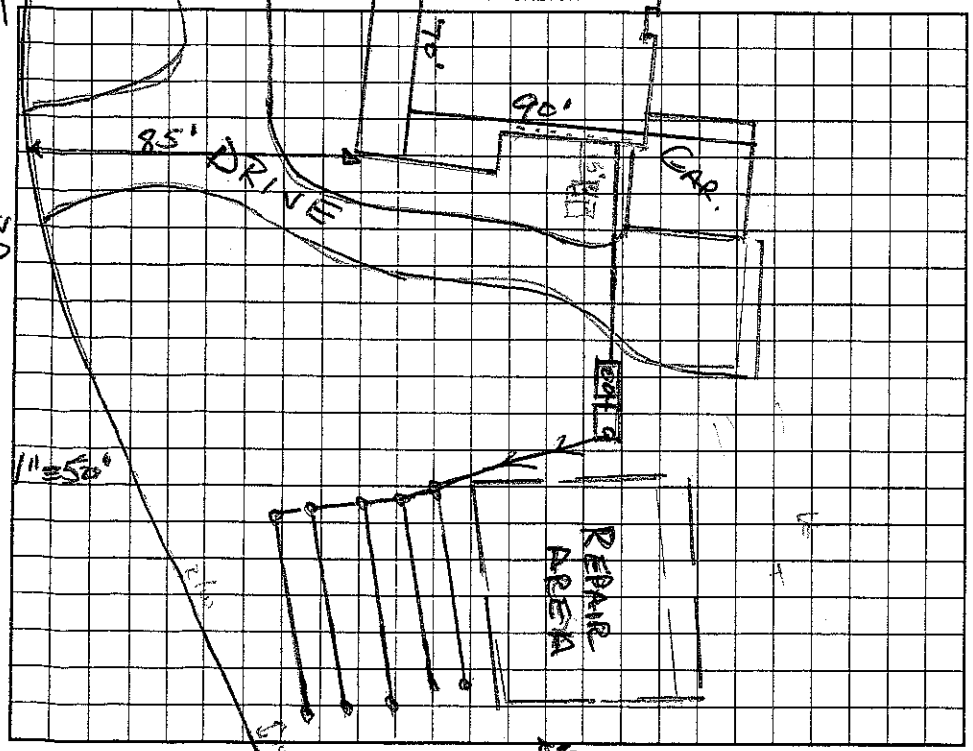
Water Supply: X Individual ☐ Public ☐ Community

Comments/Conditions: (3)

Comments/Conditions:

installed in 3 Lines 60 Pounds
88' long 3/16" holes

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: [illegible] date 2-19-03 Installed by: ROWAN SEPTIC TANK

Improvement Permit by: Wesley Sparks RS date 2/18/03 Operation Permit by: Wesley Sparks RS date 12/10/03

Authorization to Construct by: Wesley Sparks RS date 2/18/03 Existing System Inspection by: _____ date _____

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