130 1/10 C

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 114980 PIN# ~~4639-73-5078~~ 4639237709 DATE Jan 7, 04

OWNER OR CONTRACTOR Beacon Point Partners LLC // Leroy Davis PHONE: Business _____ Home _____

ADDRESS P.O. Box 3608 Mooresville N.C. 28117

LOCATION Foothills N. TR FERN Hill Rd. TR Bullfinch TL Fox Hunt Ct. (SFE IIA-1st on Right) Lot II on left

SUBDIVISION Beacon Point BLOCK / SECTION 3 LOT II / IIA LOT AREA 1.672 Ac + .393 Ac SITE CLASS. 15 DESIGN FLOW 480gpd L.T.A.R. .2 Initial lot II / .3 Repair SFE IIA

Septic Tank: 1000 Gallons; STB 794 Date 3-1-05

Pump Tank: 1000 Gallons; PT 27 Date 3-6-05

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 600

No Lines 6@100 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: PM 25% Reduction on Lot II

Repair System Description: LPPPBPS on SFE IIA

Maintenance Agreement Required: ☐ Yes ☑ No initially

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4/4 No. Bathrooms 4/4 No. Employees _____

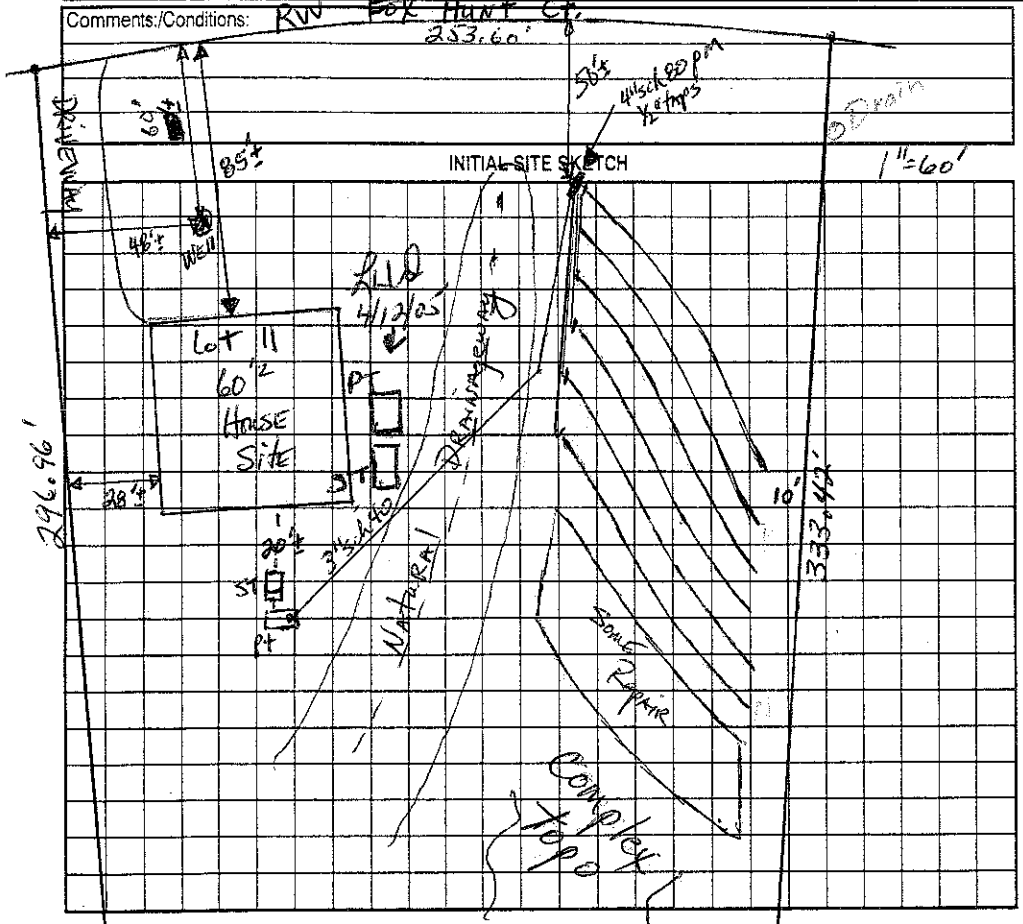
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: RW Fox Hunt Ct.

Comments:/Conditions Check tanks & lines 4/12/05 MD
Installed essentially as Drawn

INITIAL SITE SKETCH



1" = 60'

AS BUILT SKETCH

Installed E & L Flow

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: 41.87 1695.7 date 1-9-04 Installed by: Richard Abernathy

Improvement Permit by: _____ date Jan 7, 04 Operation Permit by: _____ date 5/12/05

Authorization to Construct by: _____ date 8-2-04 Existing System Inspection by: _____ date _____

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