IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 $375 MOORESVILLE 704-664-5281

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

PERMIT# 115384 PIN# 4639-49-8293 DATE 9/11/03

OWNER OR CONTRACTOR Lee Pake PHONE: Business _____ Home 828-217-4670

ADDRESS 165 Coronilla Rd Mooresville NC 28117

LOCATION Perth, TL Fern Hill, TL 1st Kenway Lp on Lt #207

SUBDIVISION CL+T BLOCK / SECTION 15 LOT 1035 LOT AREA 0.71 Ac SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 160 Date 3/11/05

Pump Tank: 1000 Gallons; PT 319 Date 3/15/05

Pump Make: Zoeller Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270

No Lines 5 Trench Width 24" or 36" Max Trench Bottom Depth 36" Gravel Depth —

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

System Description: LP Panel Block

Repair System Description: SAME

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other _____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

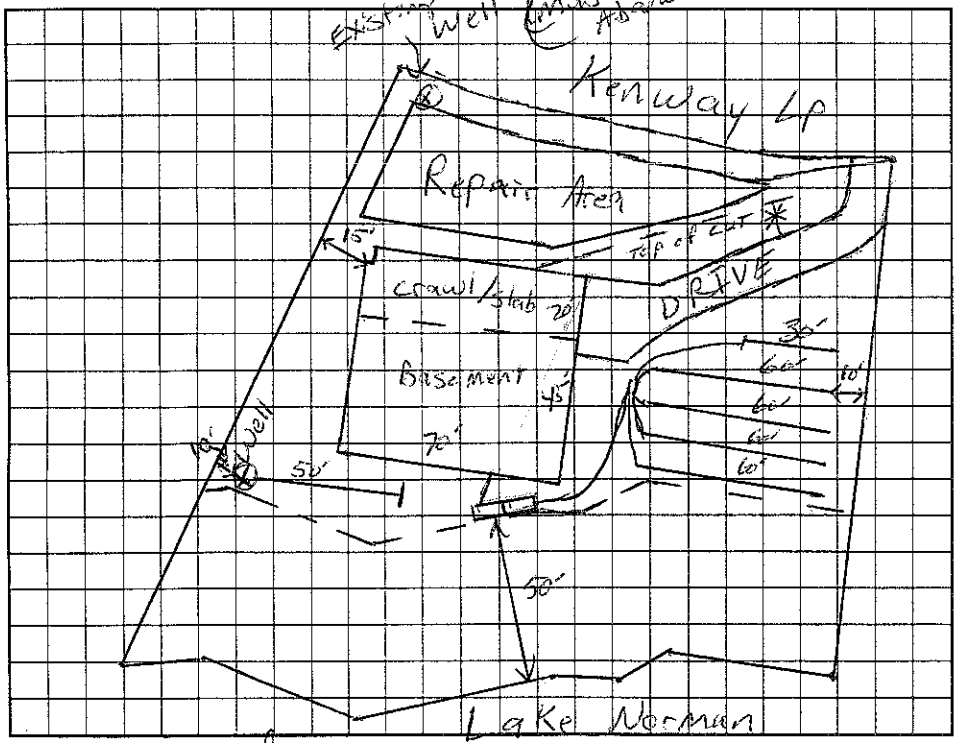
Comments:/Conditions: Test - 9 Eoc

Existing Well May be used As Irrigation - will have to be Abandoned to use repair Area

Comments:/Conditions:

* Area from the top of the cut down to Initial Drain field needs to be filled with Clean fill Dirt for a 5' setback for Repair Area

INITIAL SITE SKETCH



AS BUILT SKETCH

2 holes per panel

64 panels 3/16" holes

Everything checked by EM except Maint.

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 9/12/03 Installed by: Scott Gregory RS

Improvement Permit by: _____ RS date 9/11/03 Operation Permit by: Manual Hall Dotson date 10/26/05

Authorization to Construct by: _____ RS date 5/10/03 Existing System Inspection by: _____ date _____

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