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# 116736 PIN# 4639962769.23 4639-87-5083 DATE 3/31/04

OWNER OR CONTRACTOR HONEYSUCKLE CREEK LLC/Mark Doll PHONE: Business 201-6465 Home

ADDRESS 227 ~~HONEYSUCKLE CREEK~~ OR HIDEAWAY LN MOORESVILLE NC 28117

LOCATION PERTH (N) - TL 2nd HONEYSUCKLE CR LOOP - ON ~~LT~~ RT

SUBDIVISION HONEYSUCKLE CREEK BLOCK / SECTION LOT 23 LOT AREA 1.14AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. ~1.256-PD/FT2

Septic Tank: 1000 Gallons; STB 835 Date 6-4-05

Pump Tank: 1000 Gallons; PT 302 Date 2-5-06

Pump Make: Zoeller Model 152 Serial No.

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500

No Lines 5@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: PUMP 25% REDUCTION

Repair System Description: LP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

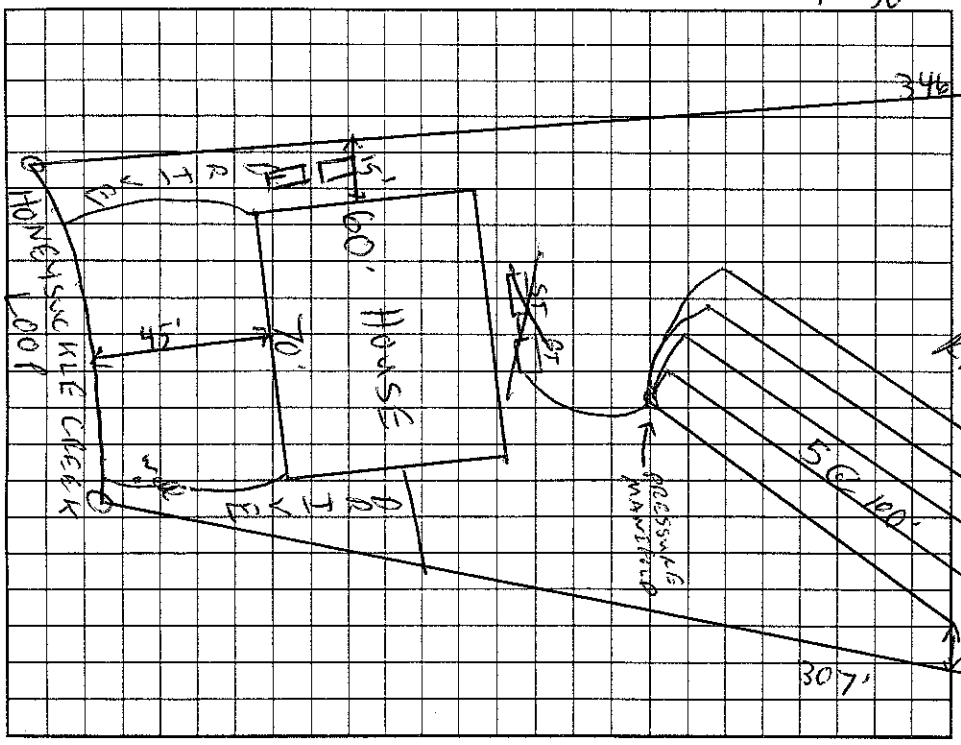
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

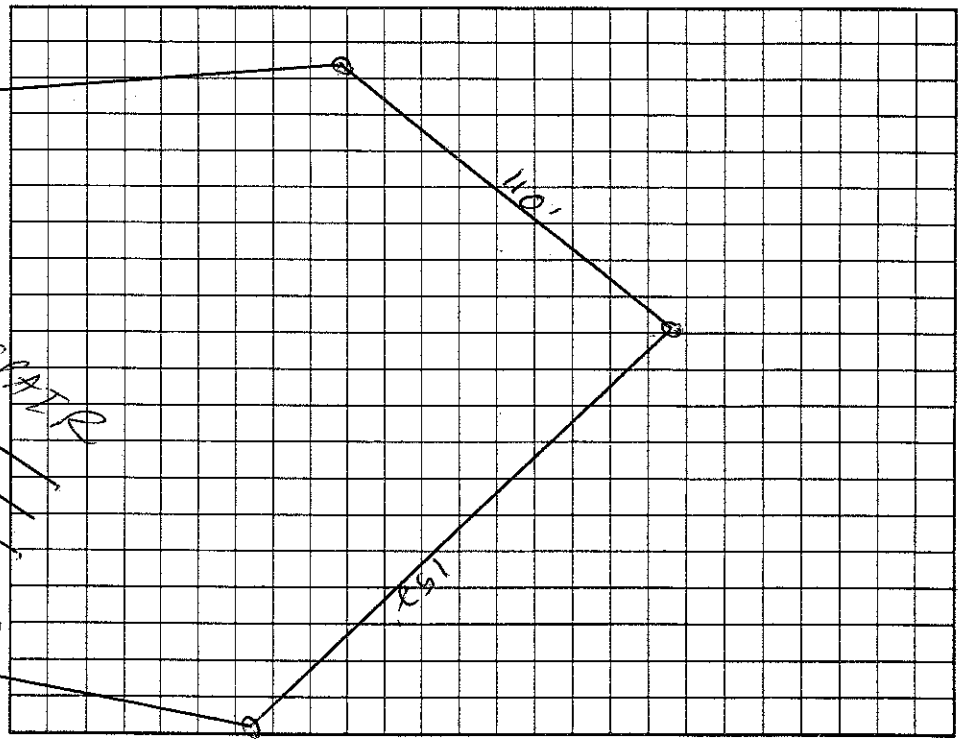
Comments:/Conditions:

Comments:/Conditions: Installed Quick 4 as drawn Checked tanks, lines & pressure 3/23/06 MS

INITIAL SITE SKETCH 1"=50'



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: date 4/2/04 Installed by: Rowan Septic

Improvement Permit by: RS date 3/31/04 Operation Permit by: RS date 5/11/06

Authorization to Construct by: RS date 10/5/05 Existing System Inspection by: date

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