4645189603 (1) 46451

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 137231 PIN# 4645189608 DATE 7-31-06

OWNER OR APPLICANT Charles Goodin PHONE: Business _____ Home _____

ADDRESS 687 Normandy Rd Mooresville NC 28117

LOCATION Alcove Rd TR) Templeton TR Henry Property on right before Bob White Ln.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA .84 Acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1012 Date 8/25/06
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 480
No Lines 6@80' Trench Width 36" Max Trench Bottom Depth 18"

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Gravity-25% Reduction
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No
Gravel Depth N/A ☒ Gravity ☐ Pressure

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other _____

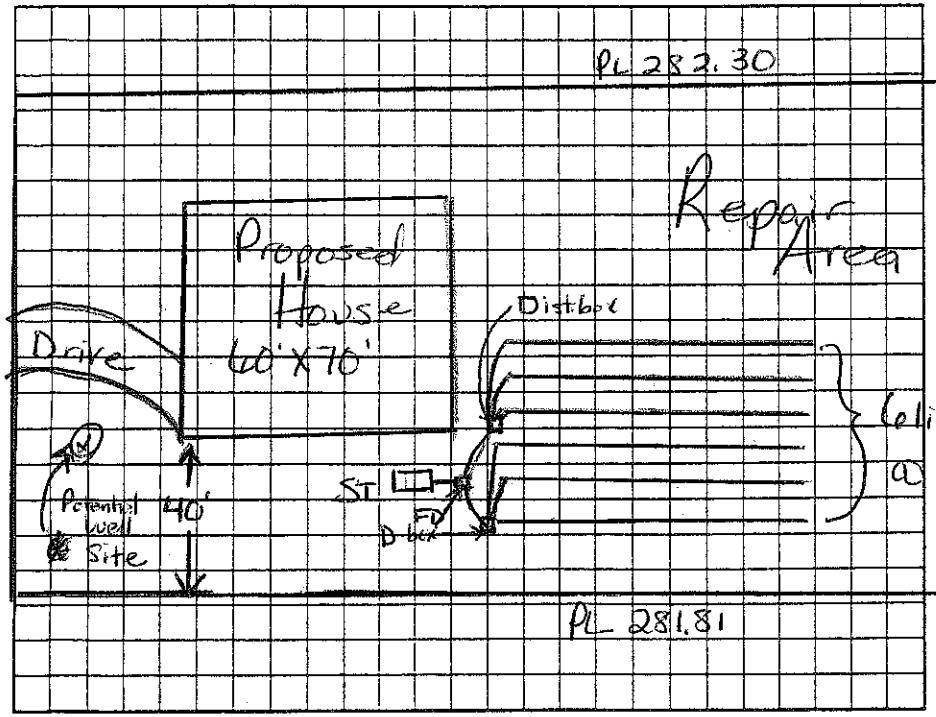
Water Supply: ☒ Individual ☐ Public ☐ Community

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

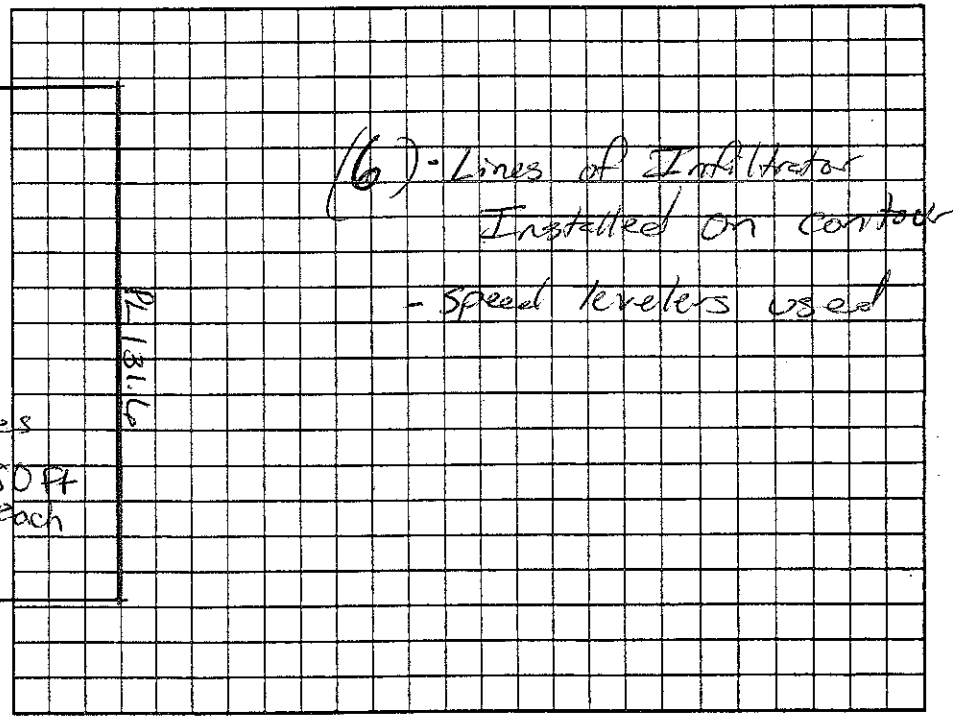
Comments:/Conditions: Note: Sewage goes to Flow Divider (FD) & then to (2) Distribution boxes.

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



Henry Lane

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: Charles W. Goodin date 8/2/06 Installed by: C+S

Improvement Permit by: Marian H. Dotson RS date 7/31/06 Operation Permit by: John E Allen date 2/28/07

Authorization to Construct by: Judy Melville date 8-7-06 Existing System Inspection by: _____ date _____

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