IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 083805 PIN# 4645 220860 DATE

OWNER OR CONTRACTOR Kathy Ehler PHONE: Business 892-9084 Home

ADDRESS 106 Bain Ln Mooresville NC 28117

LOCATION Langtree TR Yeoman at corner of Bain Ln.

SUBDIVISION Yeoman Shores BLOCK / SECTION LOT 1 LOT AREA 1.0 Acre SITE CLASS. DESIGN FLOW 240gpd L.T.A.R.

Septic Tank: 1000 Gallons; STB Date

Pump Tank: 1000 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No. Fields 1 Square Feet 720' Linear Feet 240'

No. Lines 3 Trench Width Existing Max. Trench Bottom Depth Gravel Depth 12"

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

System Description: Pumped to Conventional

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 2+Lib

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

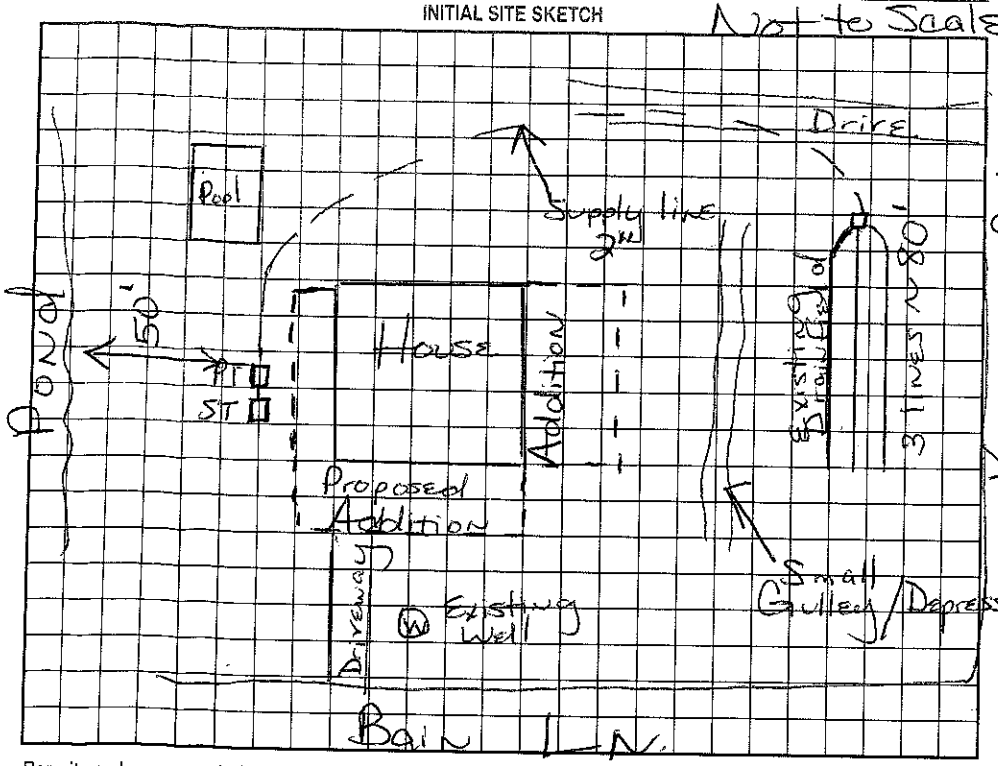
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

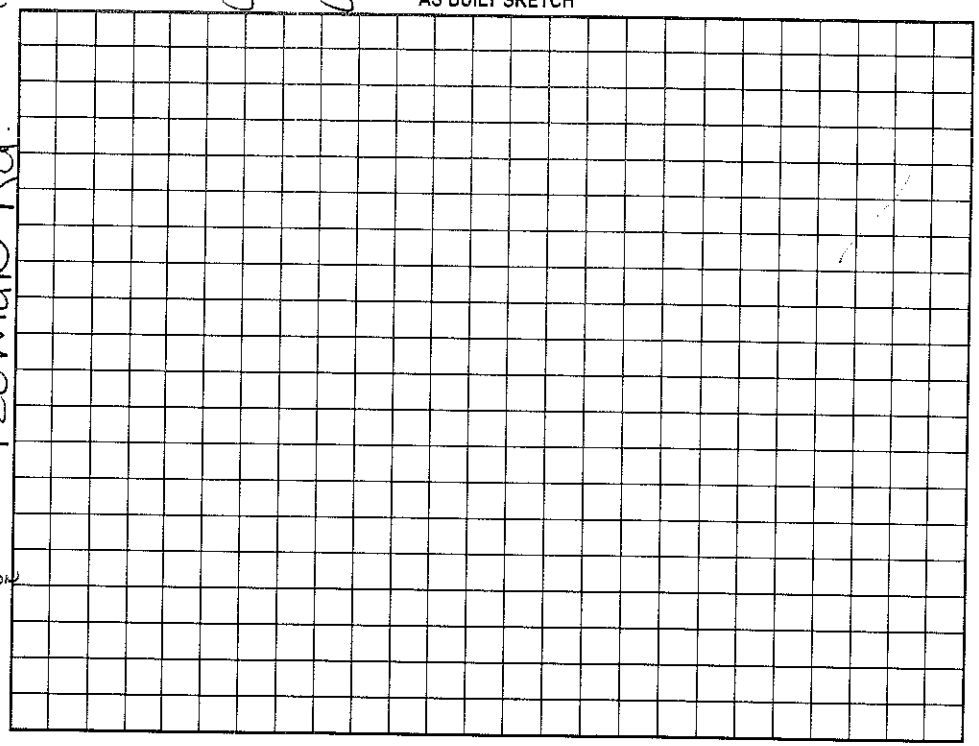
Comments/Conditions: Existing Septic System appears to be functioning okay at time of Inspection. No problems noticeable.

Comments/Conditions: Okay to add addition(s) to house but must keep any foundation at least 5' from Septic System. System originally installed 8/10/83

INITIAL SITE SKETCH Not to Scale



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: Kathy Ehler date

Improvement Permit by: Maria H. Dotson R.S. date 10/1/99

Authorization to Construct by: Maria Dotson date 10/1/99

Installed by:

Operation Permit by: date

Existing System Inspection by: Maria Dotson date 10/4/99

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