122299

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 225 MRSul. PIN# 4645-59-2250 4645-48-8772 DATE Nov. 21, 01

OWNER OR CONTRACTOR Dienst Enterprises Inc. // St Lawrence Homes PHONE: Business _____ Home _____

ADDRESS 125 Easton Drive Mooresville N.C. 28117

LOCATION 21 S. TL Alcove TR Templeton TR Templeton Bay TL Greenfield on left #137

SUBDIVISION Templeton Bay BLOCK / SECTION _____ LOT 6 LOT AREA 24,042 ft SITE CLASS. PS per 1950 DESIGN FLOW 480 gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 312 Date 8-28-04

Pump Tank: 1000 Gallons; PT 283 Date 8-20-04

Pump Make: Goulds Model 1/3 HP WE03512M Serial No. _____

Nitrification Field: No Fields 1 Square Feet 540/610 Linear Feet 270

No Lines 4 Trench Width 24" min 36" max Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LP PPBS

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

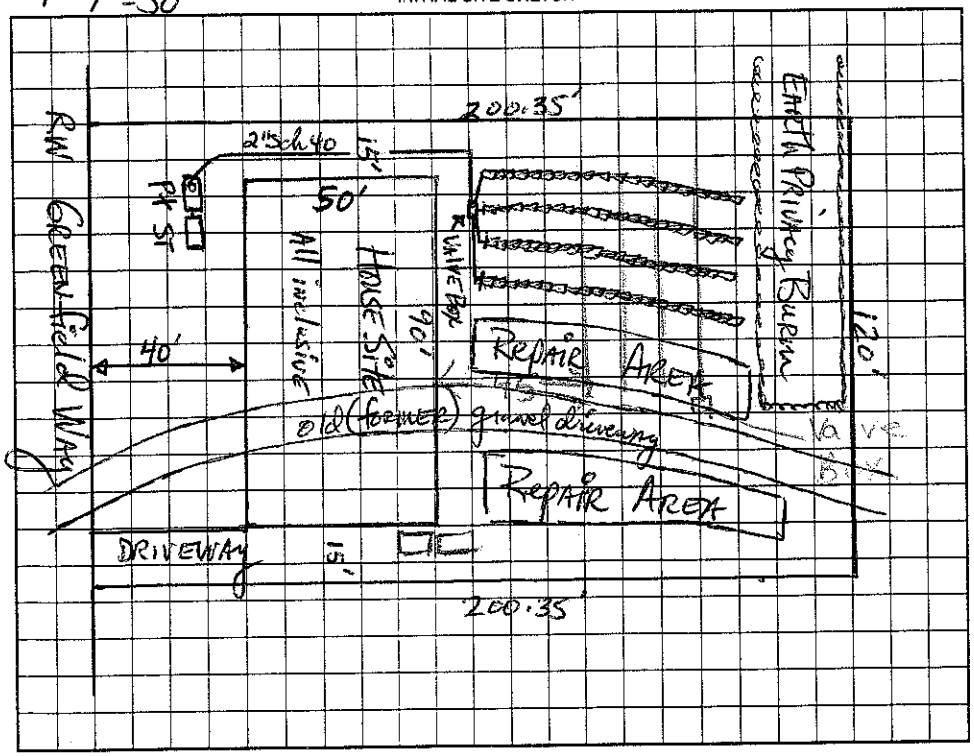
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions:

Do not cut house site. Backfill only against foundation to provide positive drainage. Remove any old burns in septic system area. Drive on other side.

1" = 50'

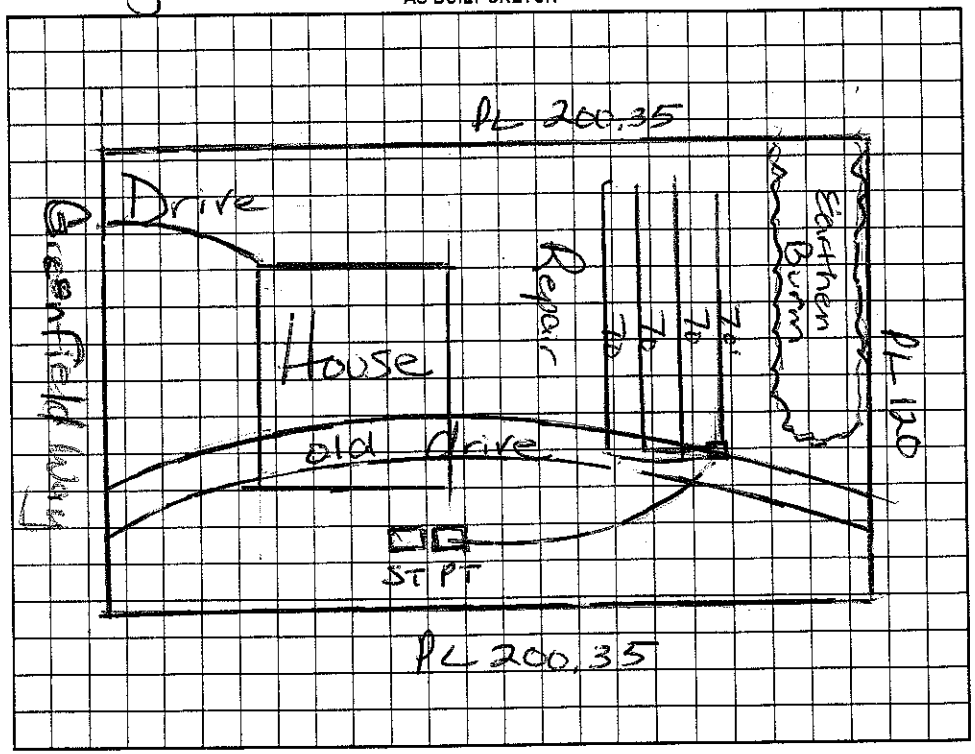
INITIAL SITE SKETCH



Comments:/Conditions: Checked lines, tanks & pressure 10/11/04 Checked Elect & alarm 10/11/04

*Note: Lot Fairly Flat so drainline configuration was Changed.

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: Robert B. Dienst date 11/6/02

Improvement Permit by: _____ date 11-21-01

Authorization to Construct by: _____ date 6-25-04

Installed by: R & H date _____

Operation Permit by: Maria H. Dolan R.S. date 10/18/04

Existing System Inspection by: _____ date _____

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