IREDELL COUNTY HEALTH DEPARTMENT

S TESVILLE 704-878-5305 / 125.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 225 Mesvl. / 2110 / PIN# ~~4645 59 2250~~ 4645592921.000 DATE Dec 17, 01

OWNER OR CONTRACTOR Dienst Enterprises Inc. / ST. LAWRENCE Homes PHONE: Business _____ Home _____

ADDRESS 125 Easton Dr. Mooresville NC 28117

LOCATION 215 TL Alcove TR Templeton TR Templeton Bay 2nd lot on Right past jct w/ Paula Jane

SUBDIVISION Templeton Bay BLOCK / SECTION _____ LOT 49 LOT AREA 29157 sf SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 9-26-04

Pump Tank: 1000 Gallons; PT 27 Date 4-11-04

Pump Make: Myers Model ME50 Serial No. _____

Nitrification Field: No. Fields 1 Square Feet 1200 Linear Feet 400

No. Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: pm-Innovative -25% Red.

Repair System Description: LPP PBPS

Maintenance Agreement Required: ☐ Yes ☑ No initially

☑ 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

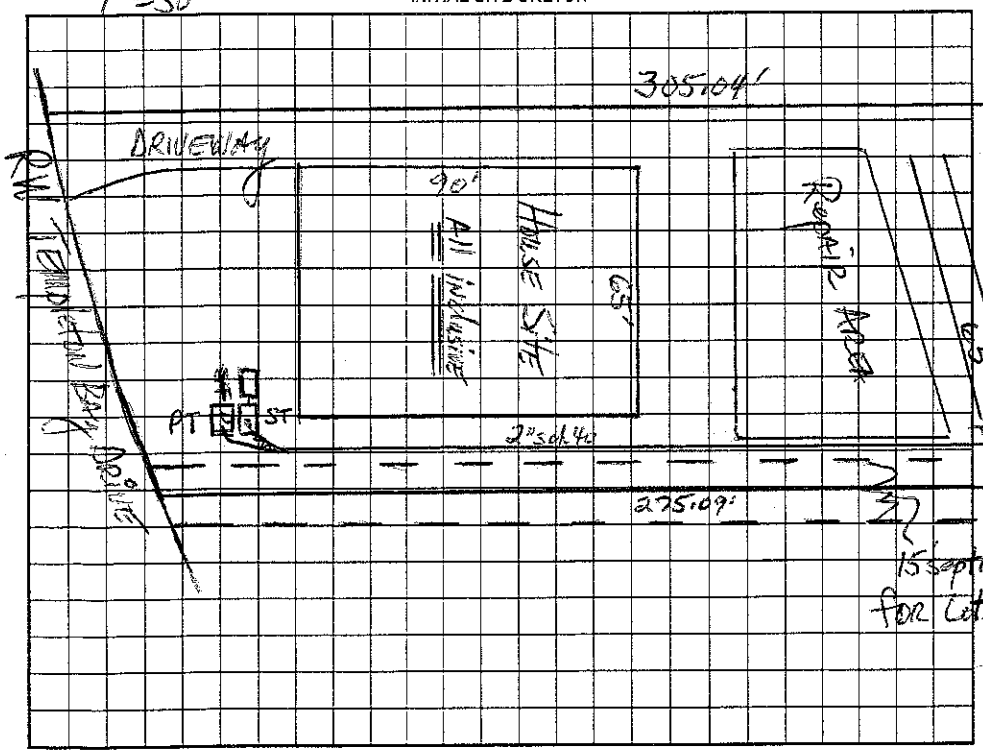
Comments:/Conditions:

Remove any old burms in septic system area.
Do not Cut around house site.

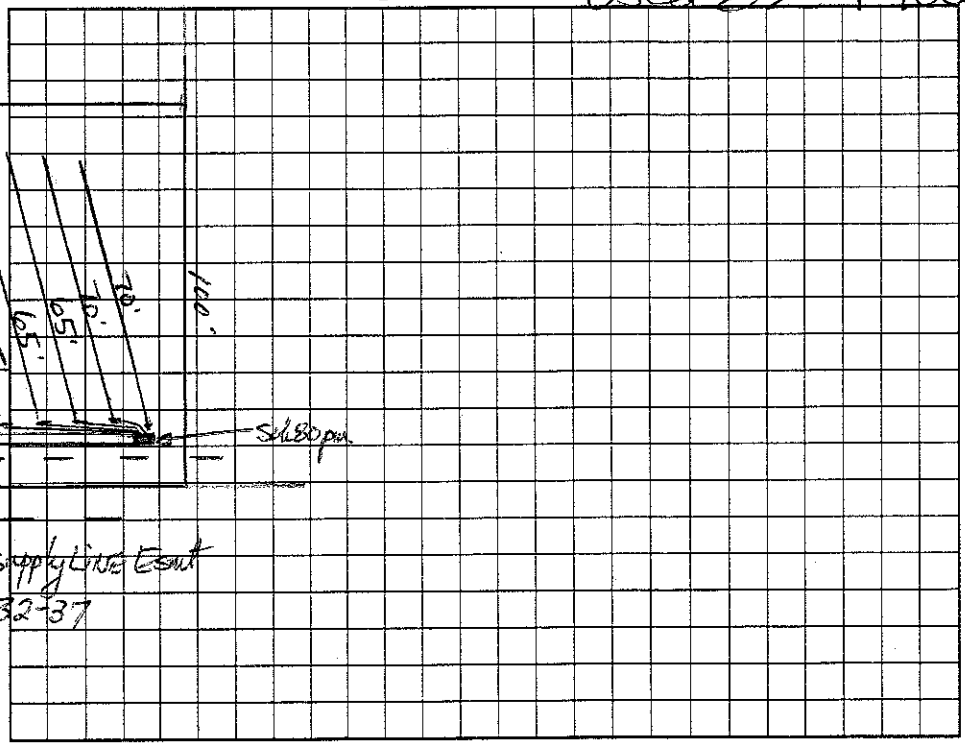
Comments:/Conditions: Installed 2-70' lines & 4 lines @ 65' ea = 400' total
Tanks & partial line checked 9/3/04
Finished inspecting lines 9/13/04

1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH Used EZ Flow



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 1/29/02

Improvement Permit by: [signature] RS date 12-17-01

Authorization to Construct by: [signature] RS date 5/18/04

Installed by: R & H

Operation Permit by: [signature] RS date 9/16/04

Existing System Inspection by: _____ date _____

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