IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 108606 PIN# ~~4646 28 4611.61~~ 4646-28-6876 DATE 10/18/02

OWNER OR CONTRACTOR DIENST ENTERPRISES PHONE: Business 309-0123 Home

ADDRESS 125 EASTON DRIVE MOORESVILLE NC 28117

LOCATION WILLIAMSON - TR SUNDOWN - TR SUNDOWN COVE - TR CORONA - TL CORONA - ON LT

SUBDIVISION ESTATES @ SUNDOWN BLOCK / SECTION 2 LOT 61 LOT AREA 25000ft² SITE CLASS RS DESIGN FLOW 480GPD L.T.A.R. .256 GPD/KF2

Septic Tank: 1000 Gallons; STB 312 Date 9/22/04
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines 4@120' 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: GRAVITY INNOVATIVE
Repair System Description: LP PANEL
Maintenance Agreement Required: ☐ Yes ☒ No

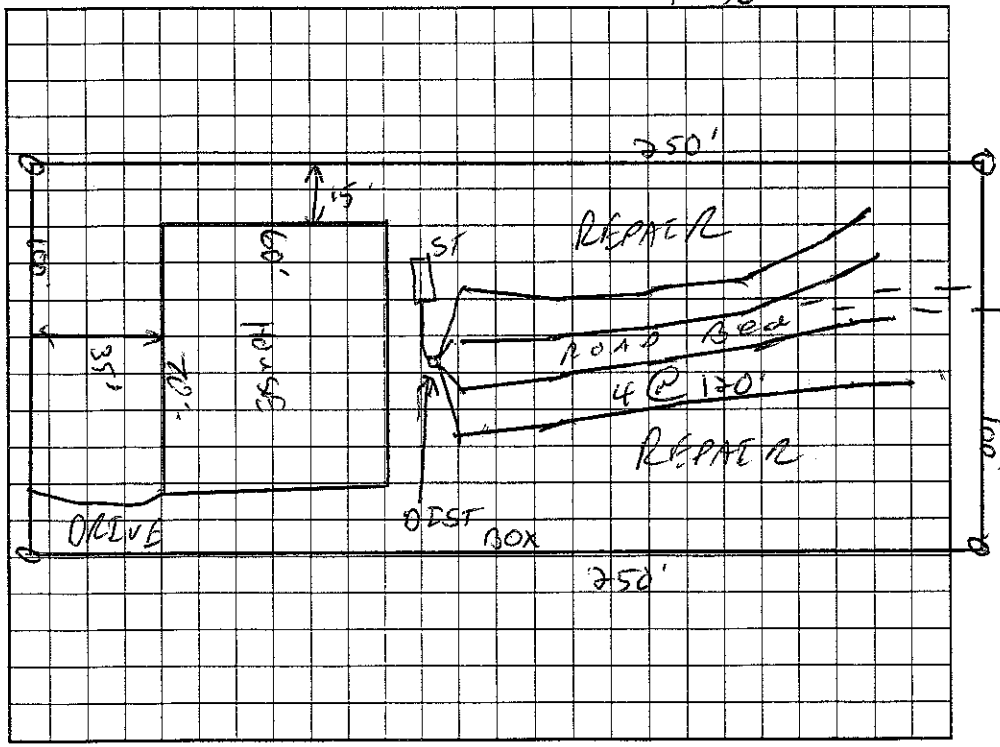
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

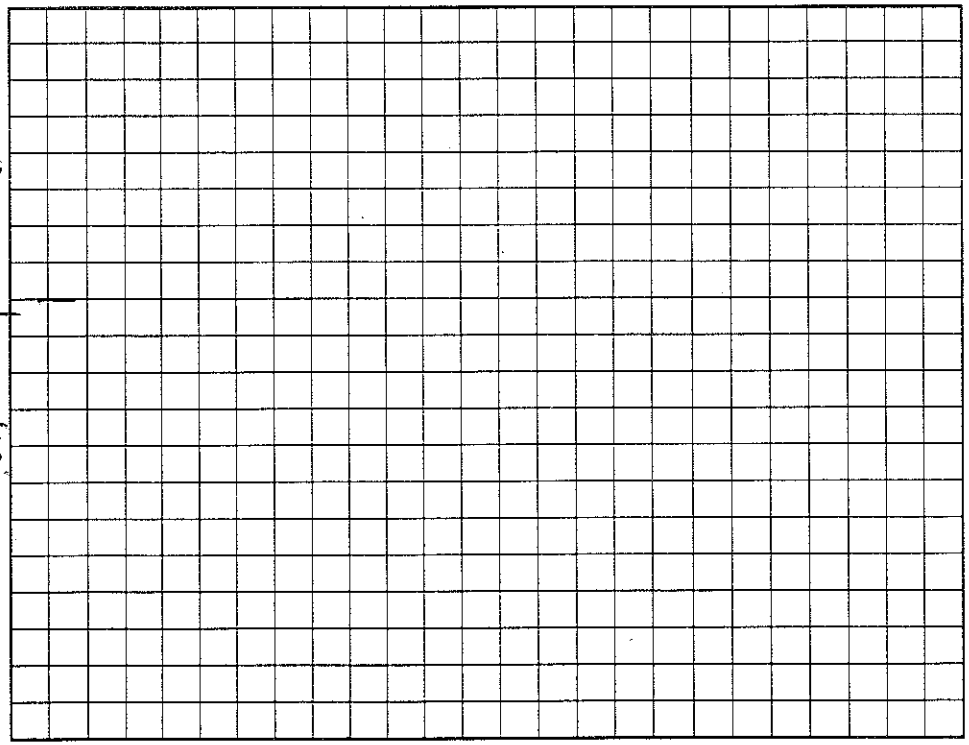
Comments/Conditions: 1) REMOVE DITCH IN ROAD BED

Comments/Conditions: Installed essentially as Drawn, Used EZ Flow

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: Robert B. Dienst date 11/22/02 Installed by: R & H RS

Improvement Permit by: [signature] RS date 10/18/02 Operation Permit by: [signature] date 10/26/04

Authorization to Construct by: [signature] RS date 9/8/04 Existing System Inspection by: date

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