IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 6794 PIN# 4647239933 4647-87-6612 DATE 7/2/99

OWNER OR CONTRACTOR Tyrone Stoner PHONE: Business _____ Home _____

ADDRESS 122 Felicity Ln Mooresville, NC 28115

LOCATION Hwy 21 N. Dates Rd past Talbertson Rd

SUBDIVISION Scarlet Oaks BLOCK / SECTION _____ LOT 14 LOT AREA _____ SITE CLASS. _____ DESIGN FLOW EXISTING

Septic Tank: _____ Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: EXISTING Model _____ Serial No. _____

Nitrification Field: No Fields _____ Square Feet _____ Linear Feet _____

No Lines _____ Trench Width EXISTING Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: _____

Repair System Description: EXISTING

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 2-3 No. Bathrooms _____ No. Employees _____

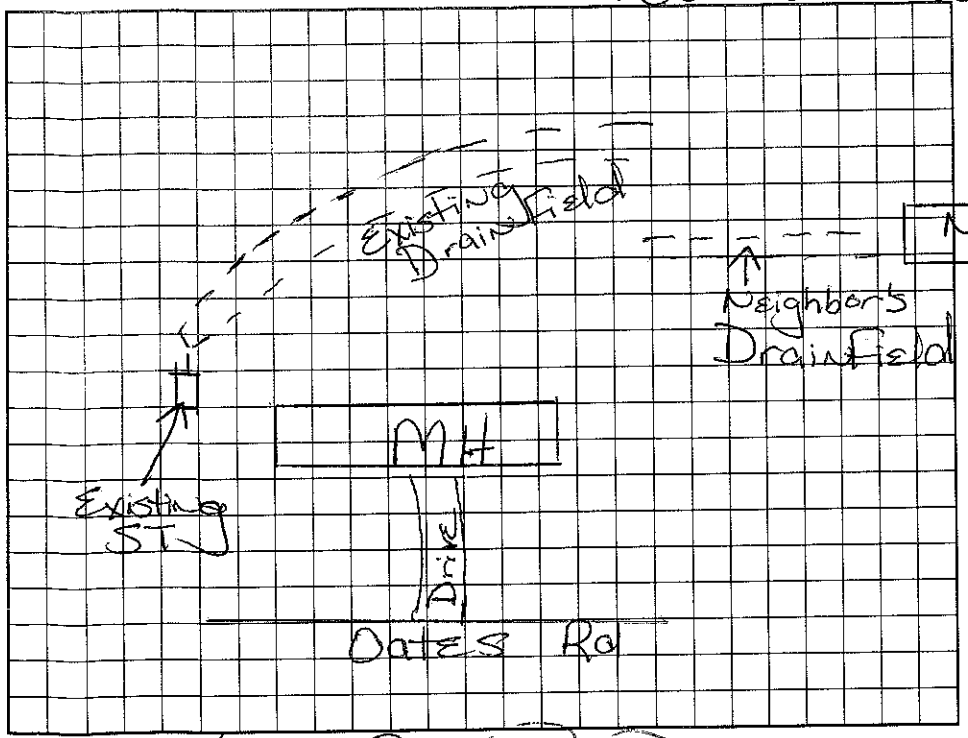
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community

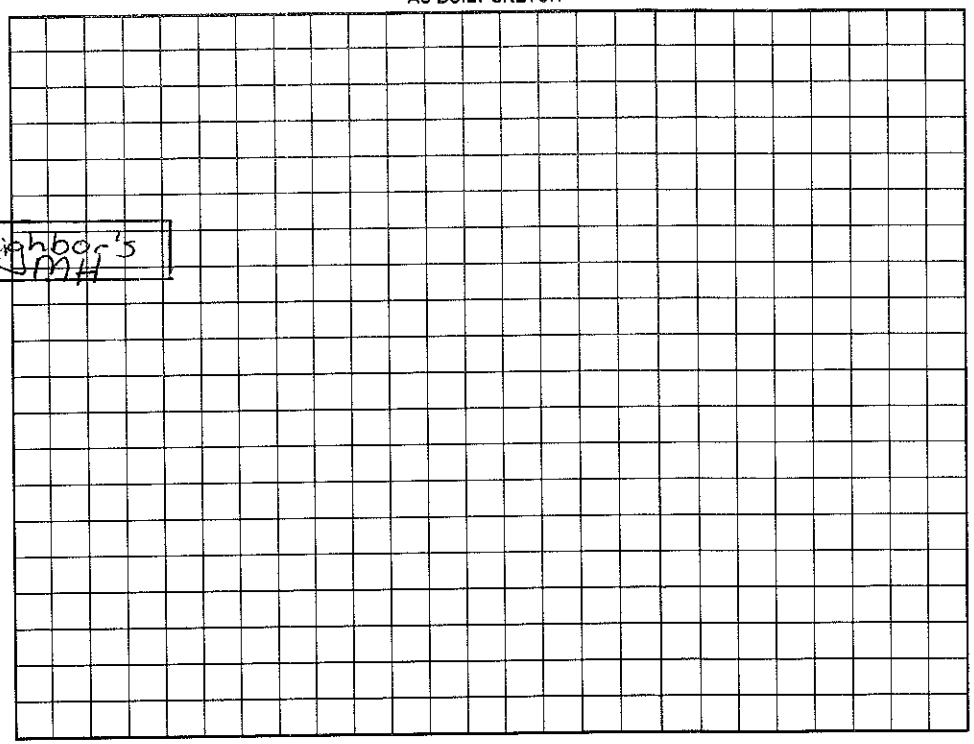
Comments:/Conditions: Existing Septic System appears to be functioning okay at time of inspections. No malfunctions at this time.

Comments:/Conditions: Grass over Septic Area needs to be mowed.

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: X _____ date _____ Installed by: _____

Improvement Permit by: Maria H. Dotson R.S. date 7/2/99 Operation Permit by: _____ date _____

Authorization to Construct by: Maria H. Dotson date 7/2/99 Existing System Inspection by: Maria H. Dotson date R.S.

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