IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 #130 MOORESVILLE 704-664-5281

9:30-10:00

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

PERMIT# 126003 PIN# 4638 90 8345.000 4648-10-6494 DATE 2/4/05

OWNER OR CONTRACTOR John B. Lauber PHONE: Business Home 704-663-0866

ADDRESS 330 Erwin Rd. Mooresville, NC. 28117

LOCATION 150 N TR Erwin Rd. thru Sharp Curve, 3rd lot from Cul de sac on (R)

SUBDIVISION Lynnbrook Acres BLOCK / SECTION LOT 12 LOT AREA .517 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. -3

Septic Tank: 1000 Gallons; STB 1012 Date 8/17/05
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4@75' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Conv. - 2590 Reduced
Repair System Description: 1 < 83 Plat
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

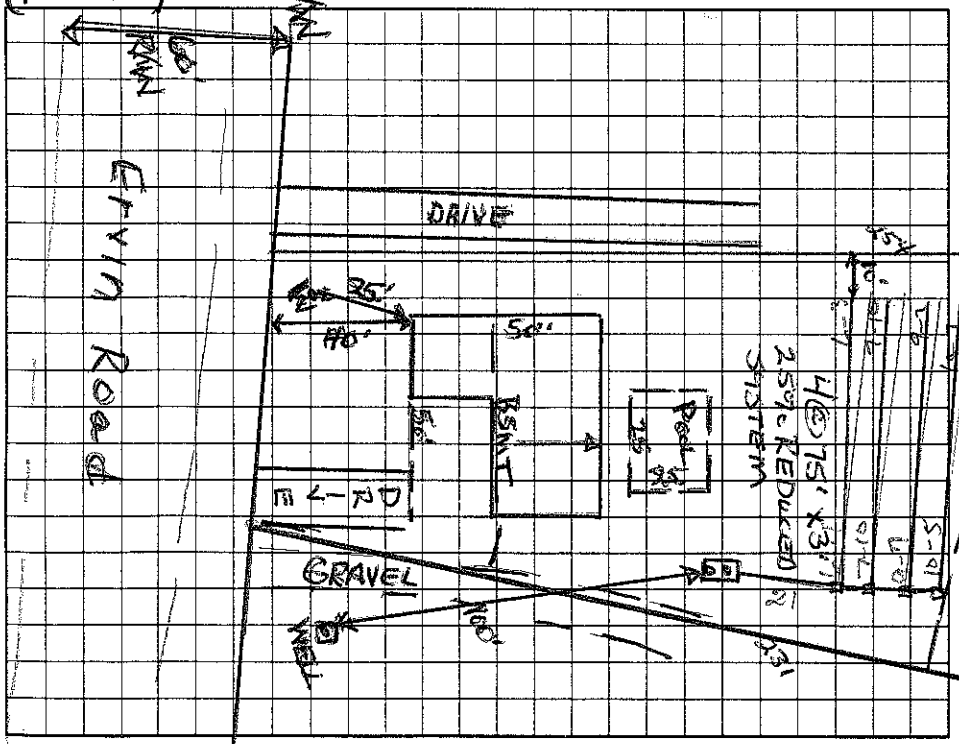
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Very tight; Do NOT make any adjustments without ICHD approval.

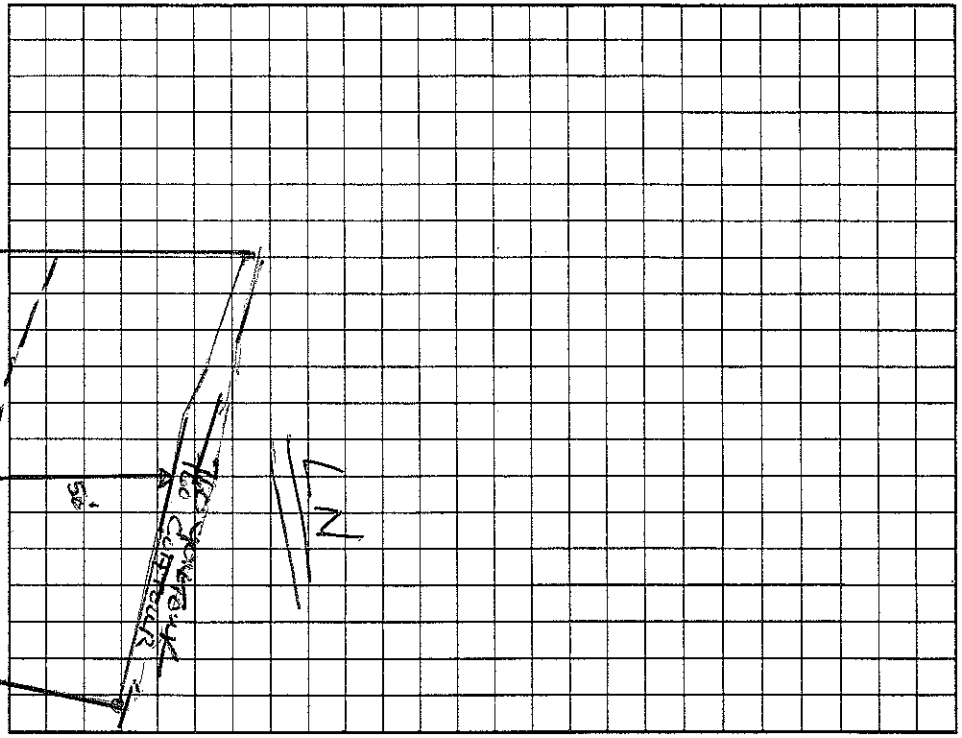
Comments:/Conditions: Taylorsville PreCast EZ Flow installed

(1" = 50')

INITIAL SITE SKETCH



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: [signature] date

Improvement Permit by: Wesley Sparks R.S. date 2/4/05

Authorization to Construct by: Wesley Sparks R.S. date 2/4/05

Installed by: Tim Parsons

Operation Permit by: Wesley Sparks R.S. date 10/20/05

Existing System Inspection by: date

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