IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 125.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 101735 PIN# 4648219752 DATE 8-9-2001

OWNER OR CONTRACTOR David & Robin Bourne PHONE: Business _____ Home 662-9758

ADDRESS 171 Diamond Dr. Mooresville, NC 28117

LOCATION 150 W. Bluefield Rd TL Big Indian Lp TL Cherokee Rd TL at end

SUBDIVISION Bearsfoot Bay BLOCK / SECTION _____ LOT 15 LOT AREA .76 Acre SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. Repair .25 - .3 (Initial)

Septic Tank: 1000 Gallons; STB 794 Date 4/19/02 ☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

Pump Tank: 1000 Gallons; PT 787 Date 4/31/02 System Description: Pump - 25% Reduction

Pump Make: MYERS Model ME-50-51 Serial No. 340 Repair System Description: Pressure Panel

Nitrification Field: No Fields 1 Square Feet 1080' Linear Feet 360' Maintenance Agreement Required: ☐ Yes ☒ No

No Lines 6@60' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3.5

☐ Business No. Employees _____

☐ Other _____

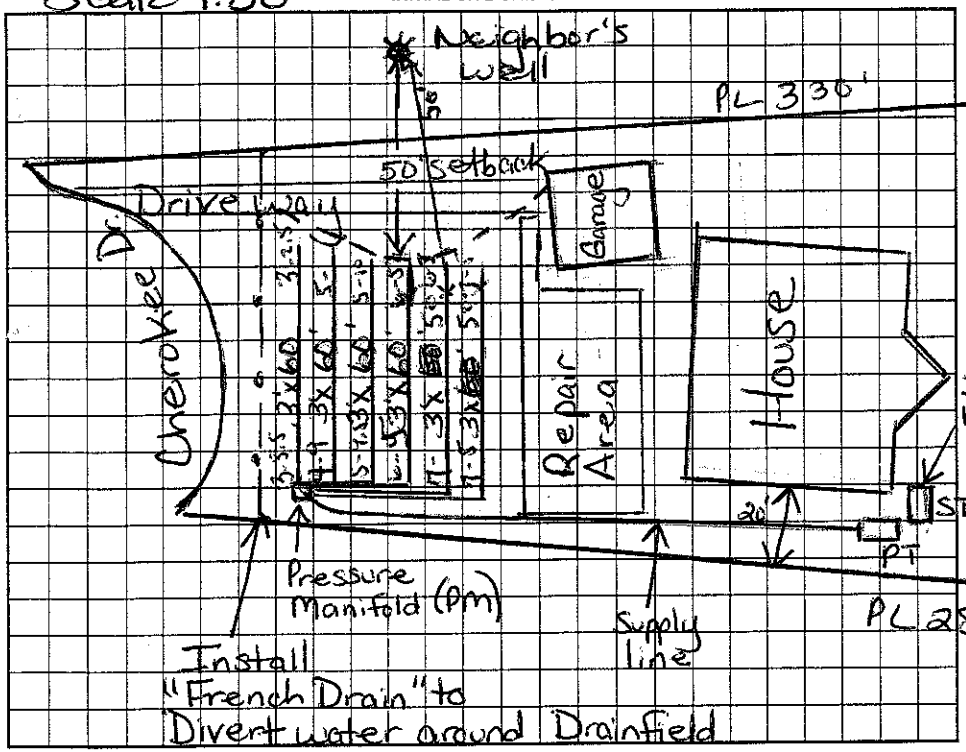
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Keep Septic System at least 10' to PL, 50' to lake & 50' to any well. Install "French Drain" around perimeter of Drainfield.

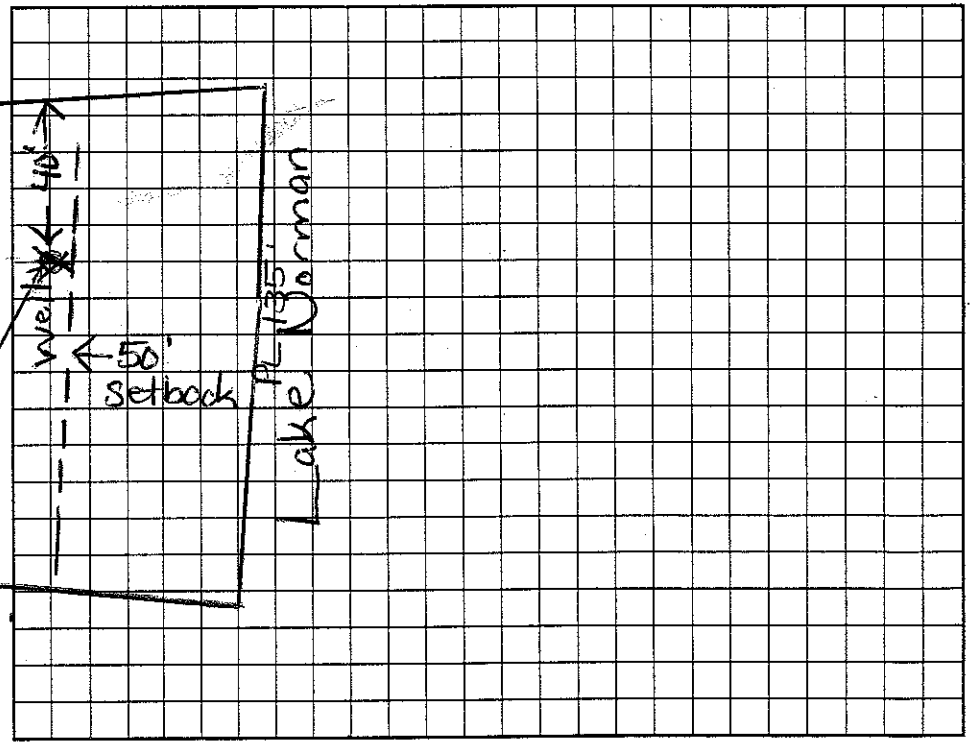
Comments/Conditions: French Drain must be done prior to Operation permit.

Scale 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: David Bourne date 8/15/01 Installed by: Tim Simmons

Improvement Permit by: Maria H. Dotson R.S. date 8/10/2001 Operation Permit by: Wesley Sparks R.S. date 9/24/02

Authorization to Construct by: Maria H. Dotson R.S. date 8/10/2001 Existing System Inspection by: _____ date _____

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