IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 130.00 Paid MOORESVILLE 704-66 -5281

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

PERMIT# 113635 PIN# 4654-49-0133.145 4654490133 DATE 6/18/03

OWNER OR CONTRACTOR Wood Lawn School PHONE: Business 704-895-8653 Home

ADDRESS 145 Woodlawn school Ln. Mooresville NC 28115

LOCATION 115 S, TL Presbyterian Rd, TL Wood Lawn sch System on Lt of Presbyterian Rd

SUBDIVISION BLOCK / SECTION LOT LOT AREA 60+AC SITE CLASS. PS DESIGN FLOW 450 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 321 Date 5/21/03

Pump Tank: 1000 Gallons; PT 40 Date 7/3/03

Pump Make: ZOELLER Model N152-A Serial No.

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

No Lines 5@80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

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

System Description: Press, Mun. 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☒ Other Classroom 45 Students

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

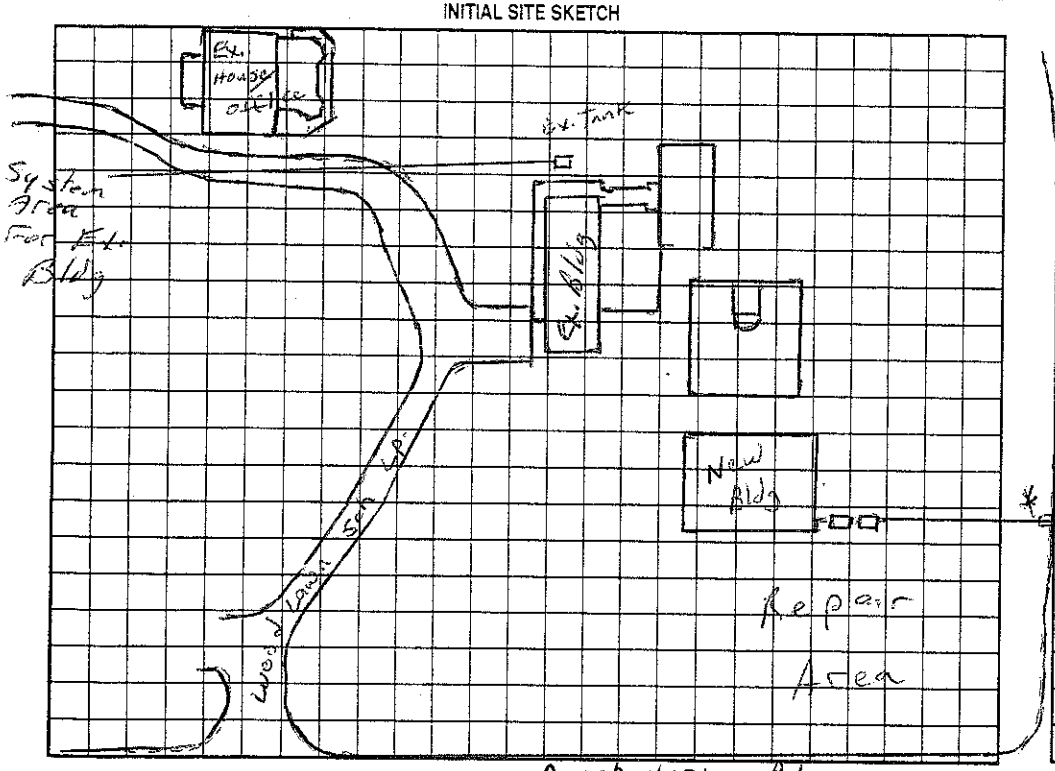
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: * Supply Line Needs to be Sleeved and/or 30" below Future Drive & well

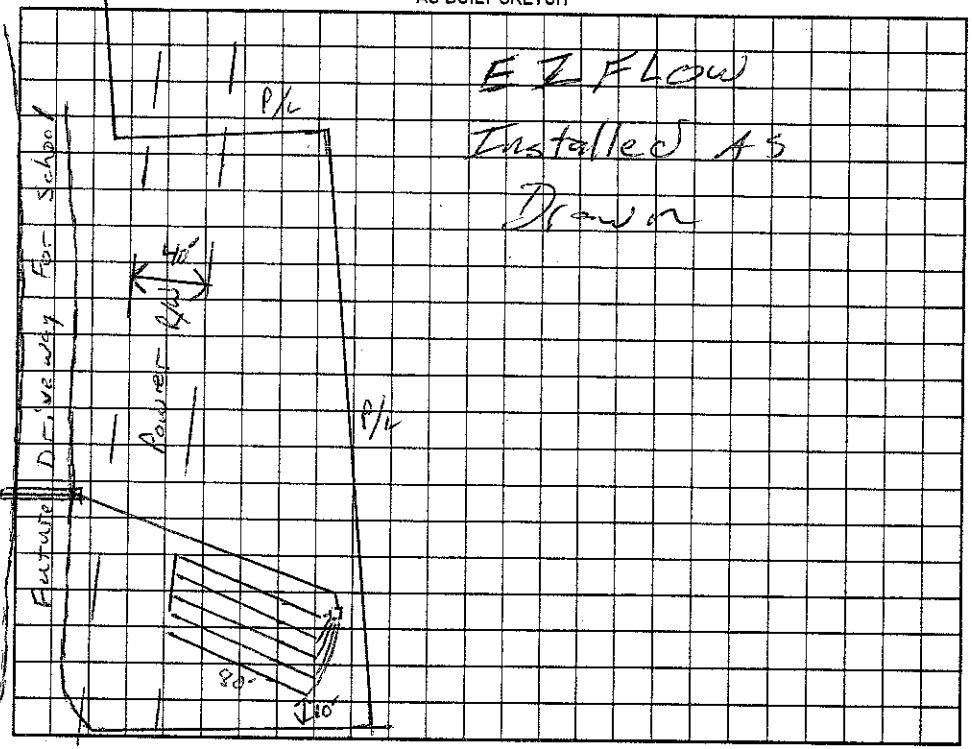
Comments:/Conditions:

P/L

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: Tony Clark, Ross Agent date 6/9/03

Improvement Permit by: RS date 6/18/03

Authorization to Construct by: RS date 6/18/03

Installed by: Dennis Willis Septic Service

Operation Permit by: date 8/28/03

Existing System Inspection by: date

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