IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 125.00 Paid 330 MOORESVILLE 704-664-5281

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

PERMIT# 090855 PIN# ~~4658995249 (Lot)~~ 4658-99-5402 DATE Dec 15, 00

OWNER OR CONTRACTOR Mid Carolina Dev. / Fleetwood Homes PHONE: Business 634-0123 Home

ADDRESS PO Box 1580 Cornelius N.C. 28031

LOCATION 115-21W TR Shinnville Rd. TL Carolina Wren TL Brunswick Low Ln. TR Skylark Way on Right

SUBDIVISION Grace Meadows BLOCK / SECTION LOT 14 LOT AREA .74Ac SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 10 12 Date 11/7/01

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 960 Linear Feet 320

No Lines 4@80 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: Gravity Innovative - 25% Red.

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home DW No. Bathrooms 2

☐ Business No. Employees

☐ Other

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

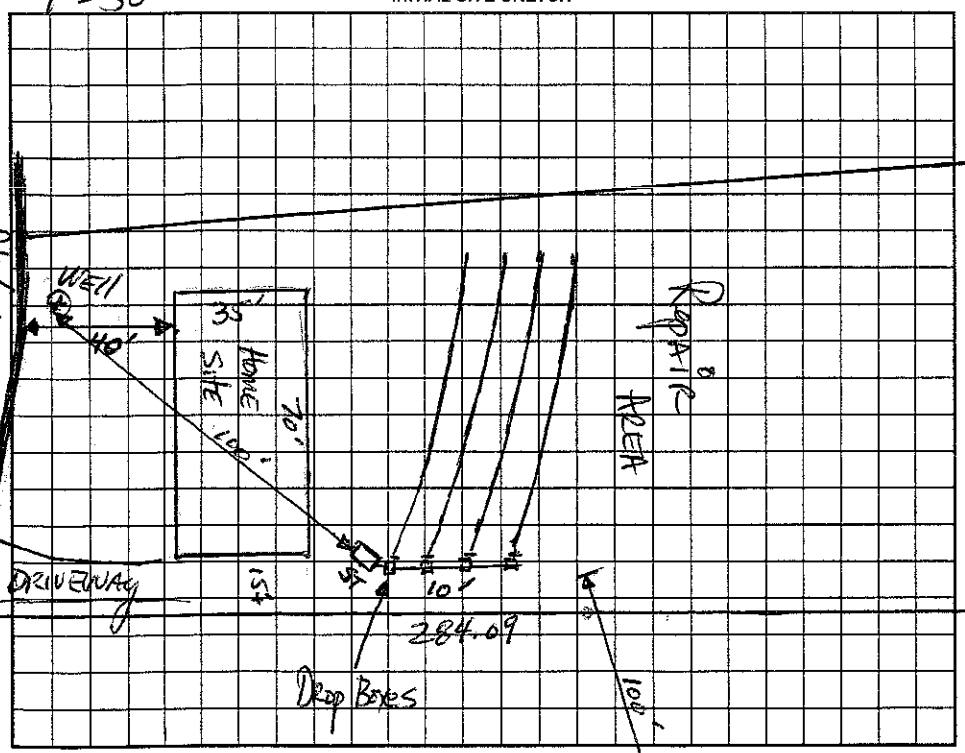
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Install well exactly where shown. Maintain 100' separation between wells & Septic systems.

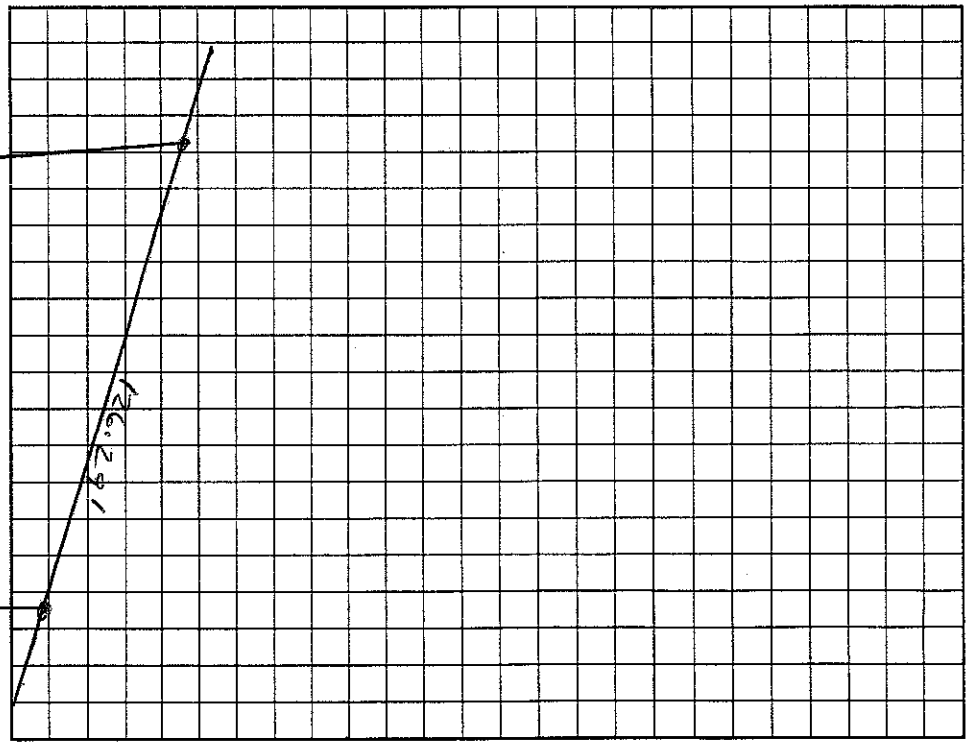
Comments:/Conditions:

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: Steve R date 12-15-00 Installed by: A-1 Backhoe

Improvement Permit by: Mark Robinson, RS date 12-15-00 Operation Permit by: date 4/3/02

Authorization to Construct by: C. Stokes date 4/2/02 Existing System Inspection by: date

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

Approved well location on Lot 10