IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 125.00 Paid 410 MOORESVILLE 704-664-5281

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

PERMIT# 090930 PIN# 4658995249 (pt) 4658-99-8401 DATE Dec. 14, 00

OWNER OR CONTRACTOR Mid Carolina Dev. PHONE: Business 634-0173 Home

ADDRESS P.O. Box 1500 Cornelius N.C. 28031

LOCATION 115-21 N TR Statesville Rd TL Carolina Views on left at jct w/ Barnsworlow Ln.

SUBDIVISION Grace Meadows BLOCK / SECTION LOT 11 LOT AREA 43,742 sf SITE CLASS RS DESIGN FLOW 360 gpd L.T.A.R. .25 +

Septic Tank: 1000 Gallons; STB 794 Date 1/12/03

Pump Tank: 1000 Gallons; PT 2483 Date 4/9/03

Pump Make: Goulds Model WE05111H Serial No.

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: PM - Innovative - 25% Red.

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home DW ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

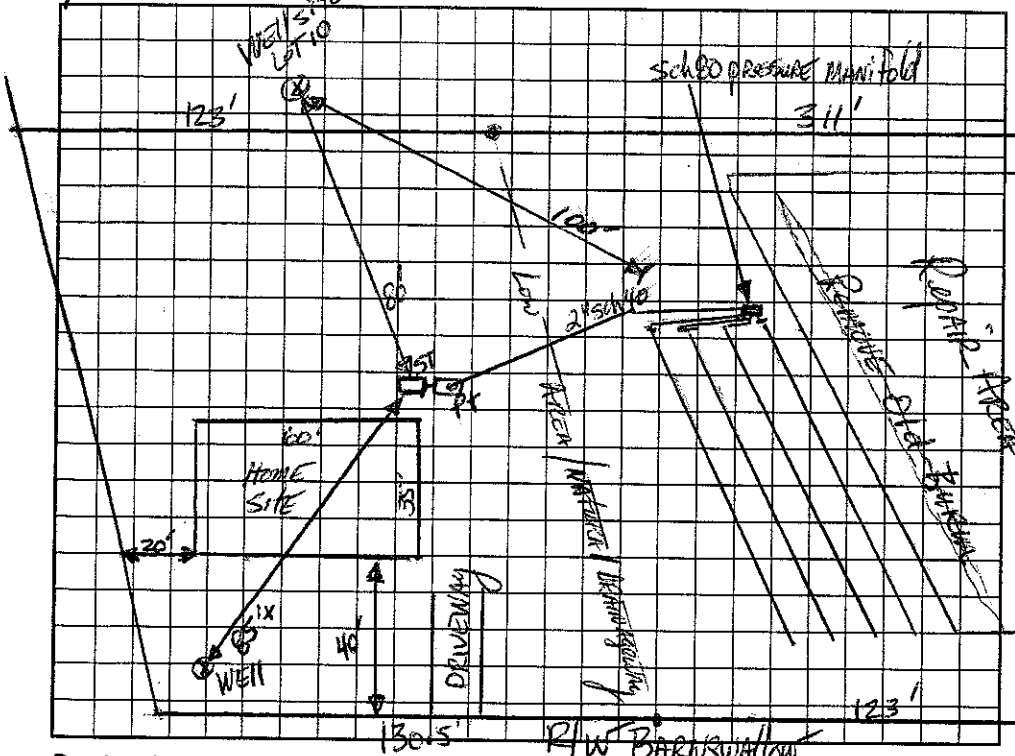
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Install well & Septic System EXACTly as Shown.

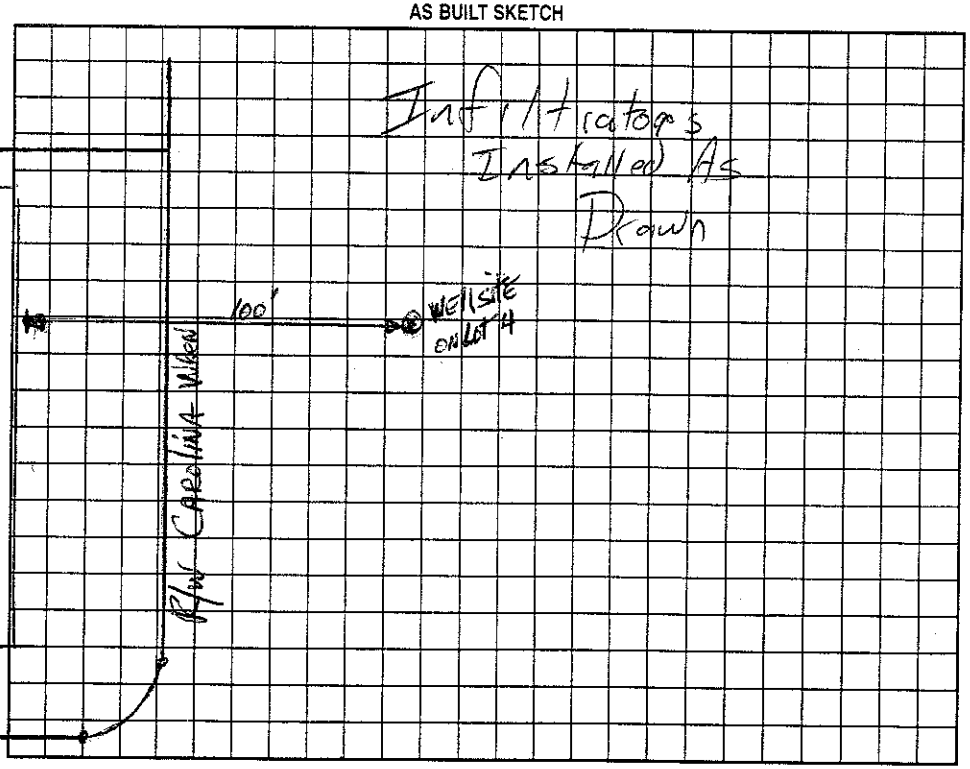
Comments:/Conditions:

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: [signature] date 12-15-00 Installed by: Marty Tucker

Improvement Permit by: [signature], RS date 12-14-00 Operation Permit by: [signature], RS date 6/13/03

Authorization to Construct by: Wesley Sparks RS. date 4/2/03 Existing System Inspection by: date

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