IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 137918 PIN# 4664987703 DATE 9-20-06

OWNER OR APPLICANT Patty Bentley PHONE: ~~Business~~ Cell 400-1014 Home 664-7202

ADDRESS 330 Johnson Dairy Rd Mooresville NC 28115

LOCATION Hwy 3 TR Johnson Dairy Cross both bridges 1st driveway on left to back of property

SUBDIVISION ______ BLOCK / SECTION ______ LOT ______ LOT AREA 126 Acres SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Exist Septic Tank: 1000 Gallons; STB ______ Date ______
Pump Tank: ______ Gallons; PT ______ Date ______
Pump Make: ______ Model ______ Serial No. ______
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
Exist No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12" ☐ Gravity ☐ Pressure

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Gravity - Conventional
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other Daylight
No. Bedrooms 3 No. Persons 2 No. Employees ______
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

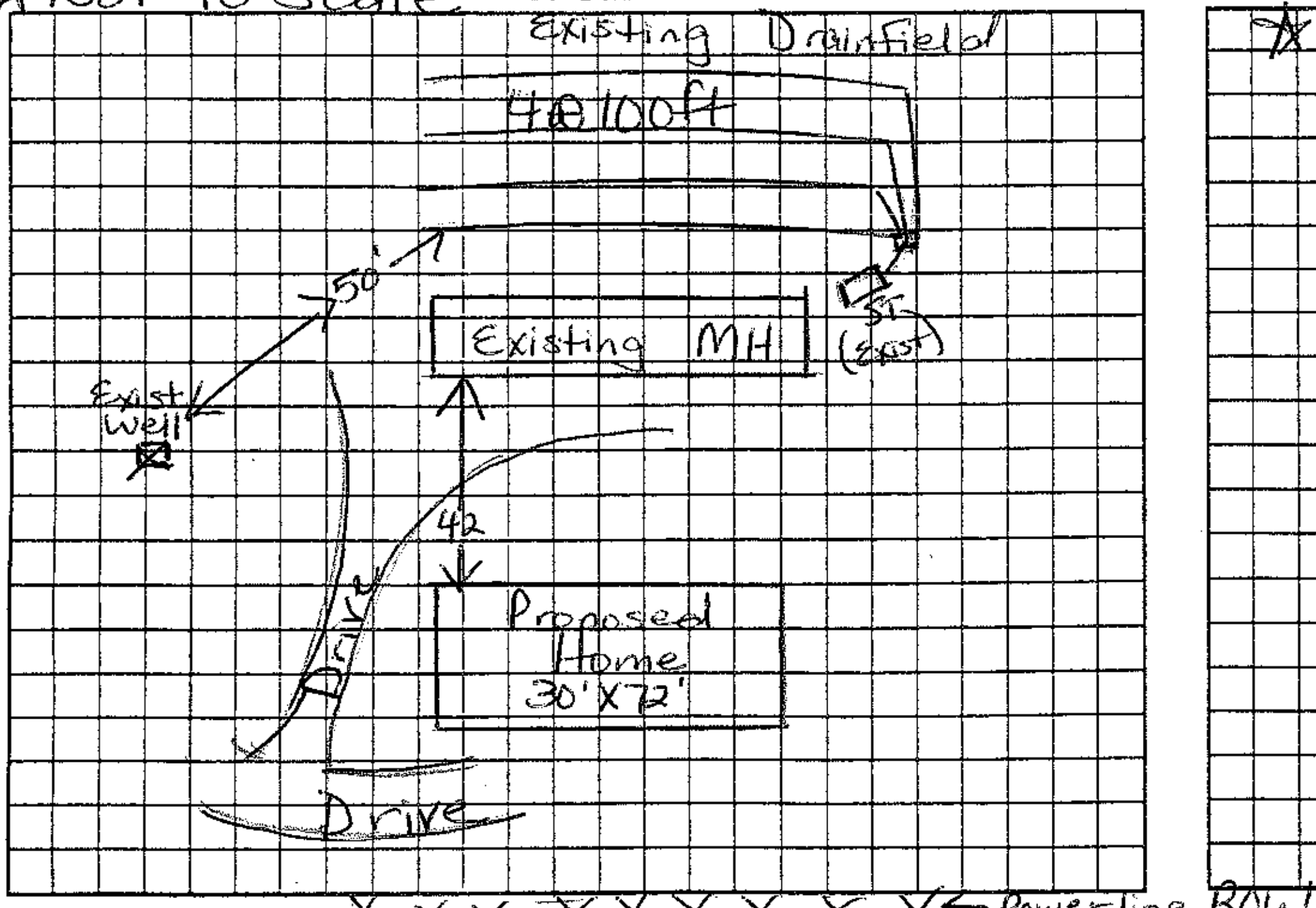
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Existing Septic System appears to be functioning okay at time of inspection, No problems Noticed

Comments:/Conditions: New House must be out of Power line ROW. Basement plumbing must stub out high enough to gravity feed to existing ST

*Not to Scale

INITIAL SITE SKETCH



AS BUILT SKETCH

*Original permit attached.

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: Patty J. Bentley date 9-20-06 Installed by: ______

Improvement Permit by: Maria H Dobson RS date 9/20/06 Operation Permit by: ______ date ______

Authorization to Construct by: Maria H Dobson RS date 9/20/06 Existing System Inspection by: Maria H Dobson RS date 9/20/06

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