IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 120156 PIN# 4665-62-5196 DATE 4/28/04

OWNER OR CONTRACTOR Jerry McCleary PHONE: Business _____ Home 704 682-3109

ADDRESS 168 Spring Time Ln Mooresville NC 28115

LOCATION #W 1155, Rt Springtime, on Rt #168

SUBDIVISION Timberview BLOCK / SECTION _____ LOT 31 LOT AREA _____ SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. —

Septic Tank: Ex. 1000 Gallons: STB _____ Date _____

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet Ex. 1050 Linear Feet Ex. 350

No Lines 4 Trench Width — Max Trench Bottom Depth — Gravel Depth 12"

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

System Description: Existing Conventional

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

Existing

Comments:/Conditions:

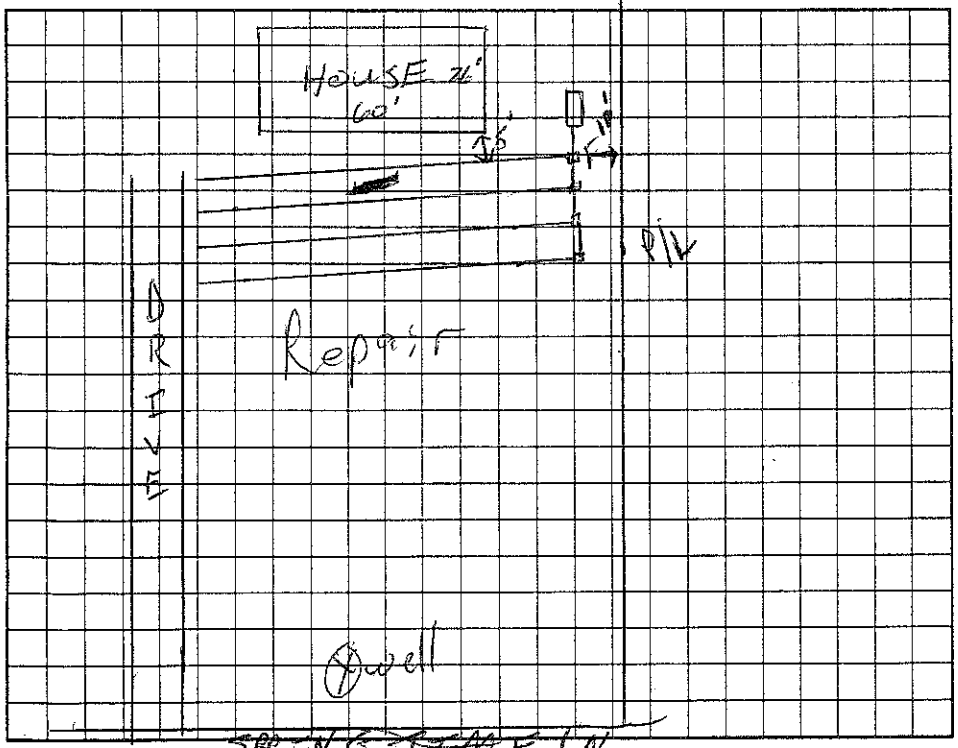
NOT to Scale

Comments:/Conditions:

Keep Foundation 5' From Septic lines

Original - Jerry McCleary 1990' (attached)

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: Jerry McCleary date 4-29-04

Improvement Permit by: _____ date _____

Authorization to Construct by: _____ date _____

Installed by: _____

Operation Permit by: RS date 4/28/04

Existing System Inspection by: RS date 4/28/04

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