$330.00 PL

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112928 PIN# 4667-83-3373 DATE 6/16/03

OWNER OR CONTRACTOR Eastside Baptist Church PHONE: Business _____ Home _____

ADDRESS 182 Linwood Rd Mooresville NC 28117

LOCATION N. Main, TR Linwood on Rt

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 5.975 ac SITE CLASS. PS DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1500 Gallons; STB 1011 Date 11/18/03
Pump Tank: 1500 Gallons; PT 99 Date 8/24/03
Pump Make: Gould's Model VIF3 312 MU Serial No. A0456692
Nitrification Field: No Fields ____ Square Feet _____ Linear Feet _____
No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

☐ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Pump to Exist. System
Repair System Description: Conventional
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms ____
☐ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____
☒ Other Church Fellowship Bldg.

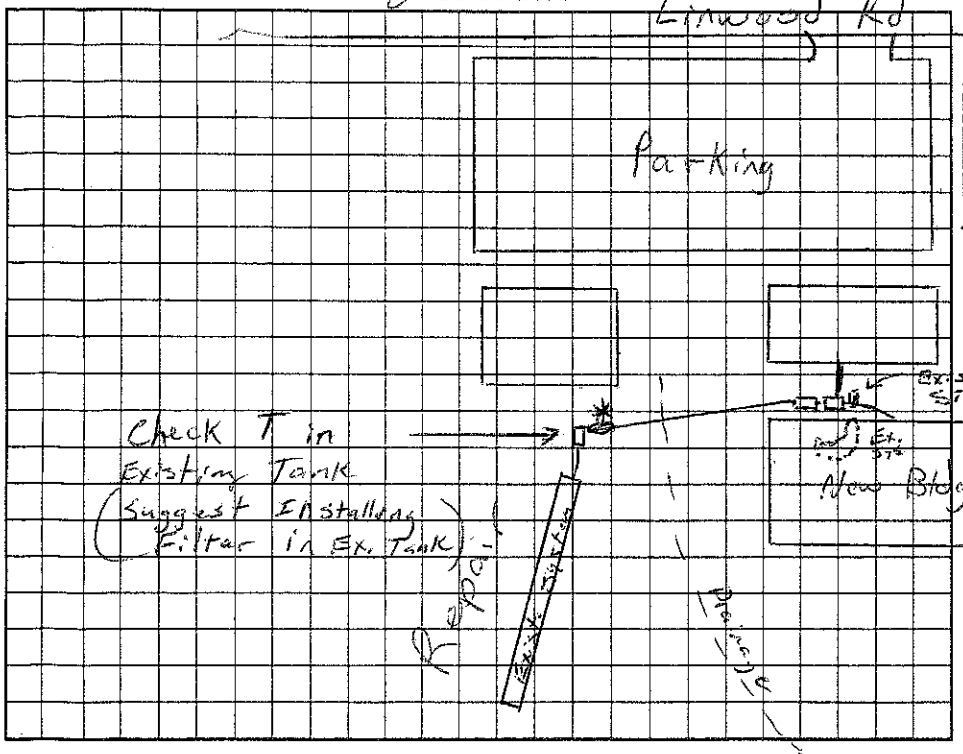
☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

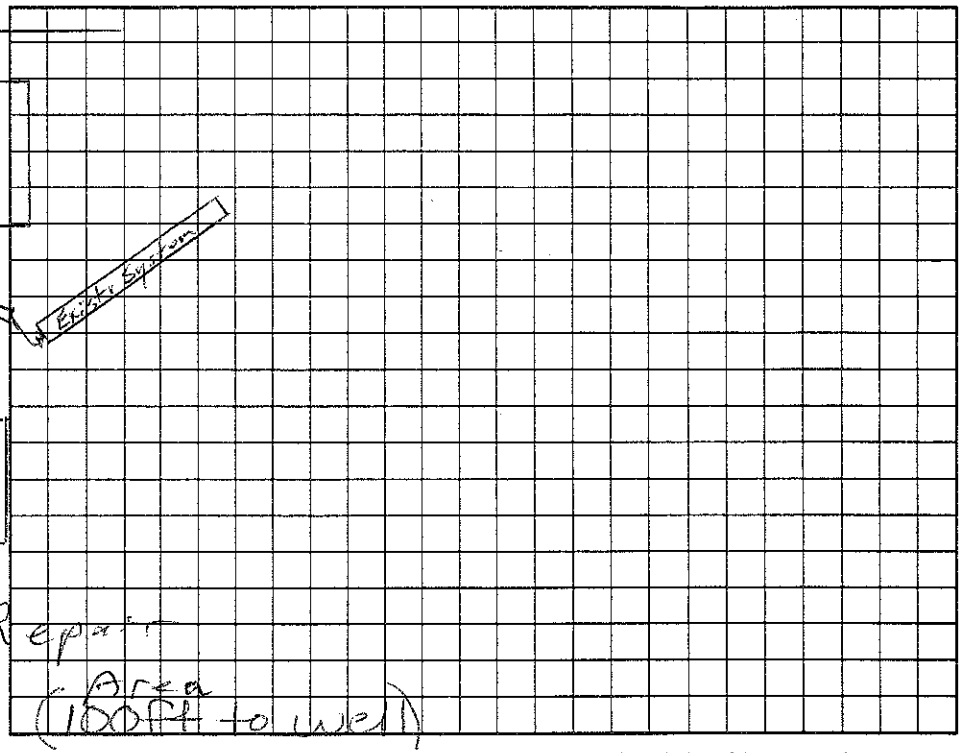
Comments:/Conditions: * 10 ft of 4" pipe before Existing Septic Tank
Pump & Fill in Existing ~~Septic~~ Tank -
New Tanks to pick up plumbing from the Basement of ~~Sanctuary~~

Comments:/Conditions: New Fellowship Bldg. w/ No Food Prep.

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: David E. Brawley date 6-23-03 Installed by: Piedmont Backhoe (Steve Tuckey)

Improvement Permit by: RS date 6/16/03 Operation Permit by: RS date 1/30/04

Authorization to Construct by: RS date 6/16/03 Existing System Inspection by: _____ date _____

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