4:00 - 4:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 090845 PIN# ~~4658995149 (pt)~~ 4668-09-2294 DATE October 19, 00

OWNER OR CONTRACTOR Mid Carolina New // Fleetwood Homes PHONE: Business 634-0173 Home

ADDRESS P.O. Box 1560 Cornelius // 28031

LOCATION 115 N. TR Shinnsville Rd. TL Carolina Wren Dr. 1st lot on Right - corner lot

SUBDIVISION Grace Meadows BLOCK / SECTION LOT 1 LOT AREA .97Ac SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .225-.25

Septic Tank: 1000 Gallons; STB 794 Date 9/17/00

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity Conventional

Repair System Description Grav/pumped Innovative

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

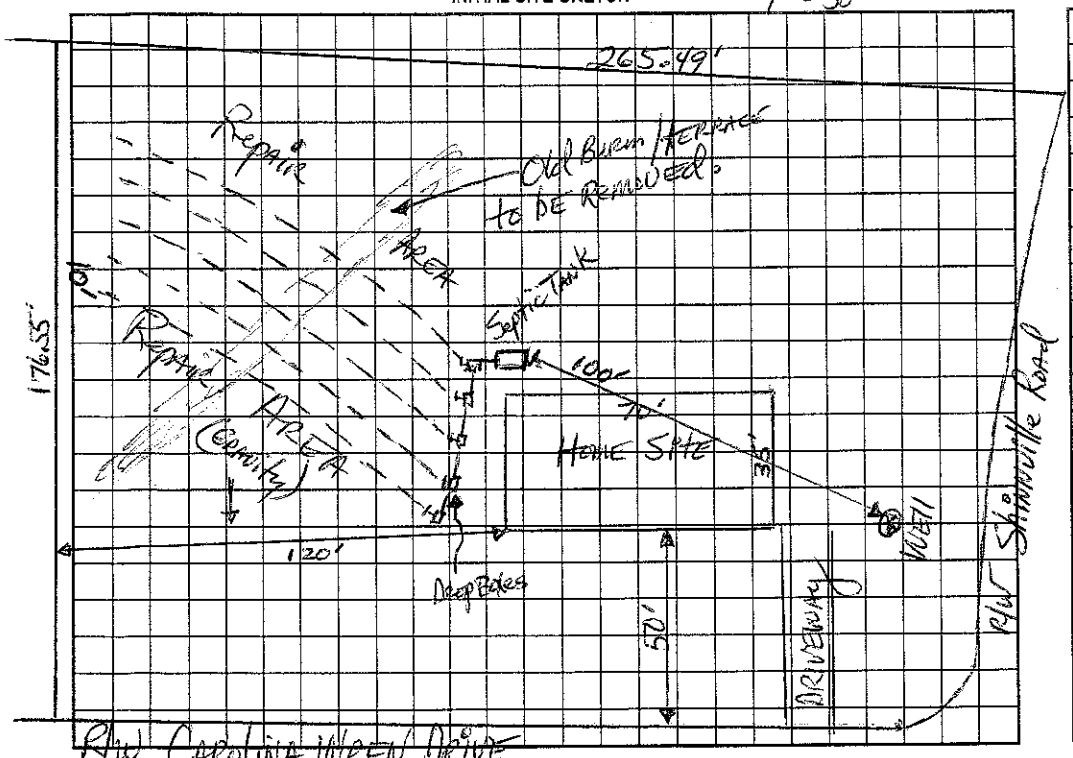
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments:/Conditions: Maintain 100' between well & septic system. Install well where shown.

Comments:/Conditions: Filter Installed
Well not Installed at time of inspection

INITIAL SITE SKETCH 1"=50'



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: Steph N. R date 10-20-00

Improvement Permit by: RS date 10-19-00

Authorization to Construct by: RS date 1-24-01

Installed by: Craig Thompson

Operation Permit by: RS date 2/6/01

Existing System Inspection by: date

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