10:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 84096 PIN# ~~4669-00-3656-RT~~ 4668-19-3670 DATE 5/19/00

OWNER OR CONTRACTOR MIKE KROOM / LARRY SLOOP PHONE: Business 664-3671 Home

ADDRESS 149 YACHT COVE LN MOORESVILLE 28115

LOCATION 115 S- TR STATESVILLE- 4TH ON LT PAST BROOK GLEN DR.

SUBDIVISION BROOK GLEN BLOCK / SECTION 1 LOT 1 LOT AREA .69AC SITE CLASS. PS DESIGN FLOW 240GPD L.T.A.R. .25 gpd/ft2

Septic Tank: 1000 Gallons; STB 794 Date 3-25-00

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1044 Linear Feet 348

No Lines 3@106' 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/PUMP SYSTEM

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

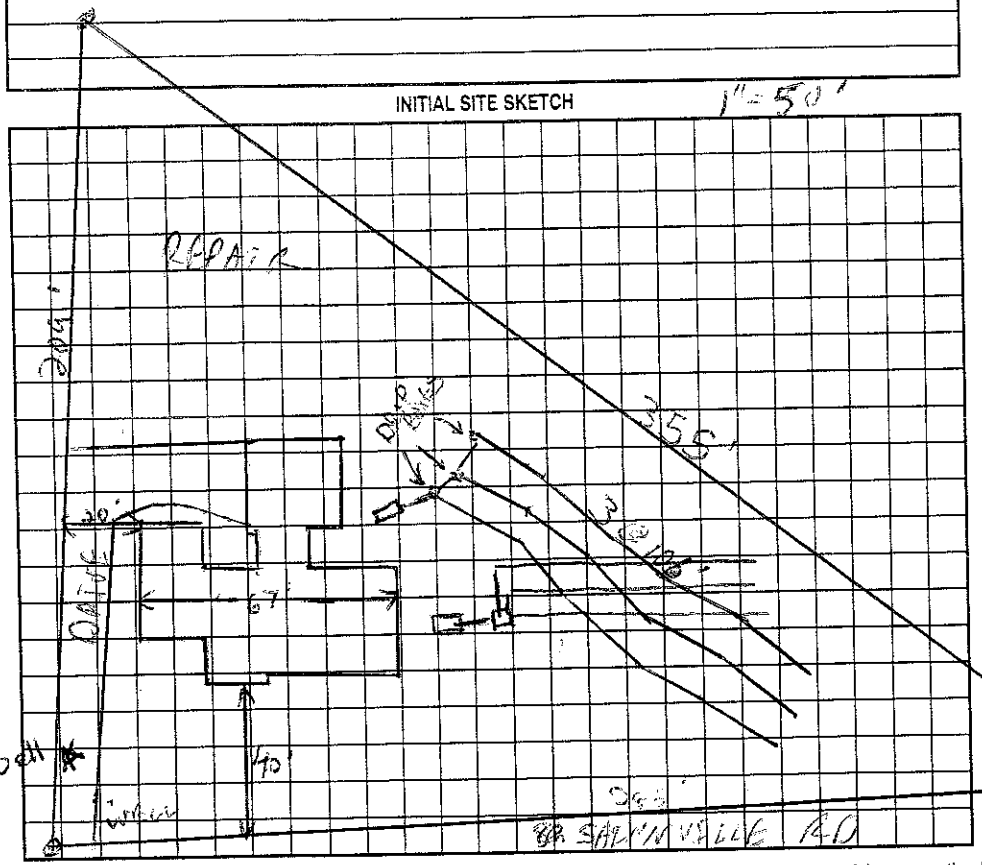
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

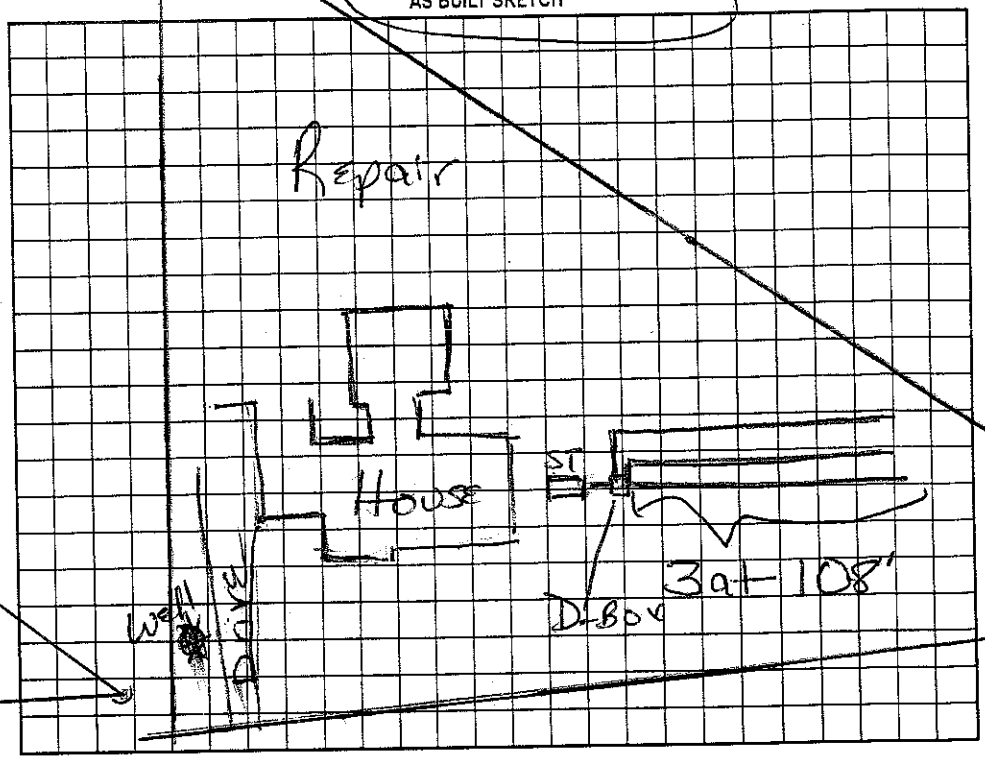
Comments:/Conditions:

Comments:/Conditions: Grey Filter installed. Installed D-Box w/Speed levelers w/ Conventional drainfield.

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: date

Improvement Permit by: EHS date 5/19/00

Authorization to Construct by: EHS date 5/19/00

Installed by: Wayne Orbison

Operation Permit by: Marian H. Dobson RS date 11/27/2000

Existing System Inspection by: date

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