IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089163 PIN# 4669003656 PT 4669008715 DATE 10/31/01

OWNER OR CONTRACTOR KFS INVESTMENTS / RUSSELL ROBIE PHONE: Business 664-3671 Home

ADDRESS 149 YACHT COVE LN - MOORESVILLE

LOCATION 115 N- TR SHINNVILLE - TL BROOK GLEN - ON RT

SUBDIVISION BROOK GLEN BLOCK / SECTION 1 LOT 16 LOT AREA .77AC SITE CLASS. RS DESIGN FLOW 360GPD L.T.A.R. 3680/F

Septic Tank: 1000 Gallons; STB 1012 Date 1-26-02
Pump Tank: 1000 Gallons; PT 11 Date 12-9-01
Pump Make: Goulds Model WE05111 Serial No. S03563427
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 9@75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: PUMP 25% REDUCTION
Repair System Description: LD PANEL
Maintenance Agreement Required: ☐ Yes ☑ No

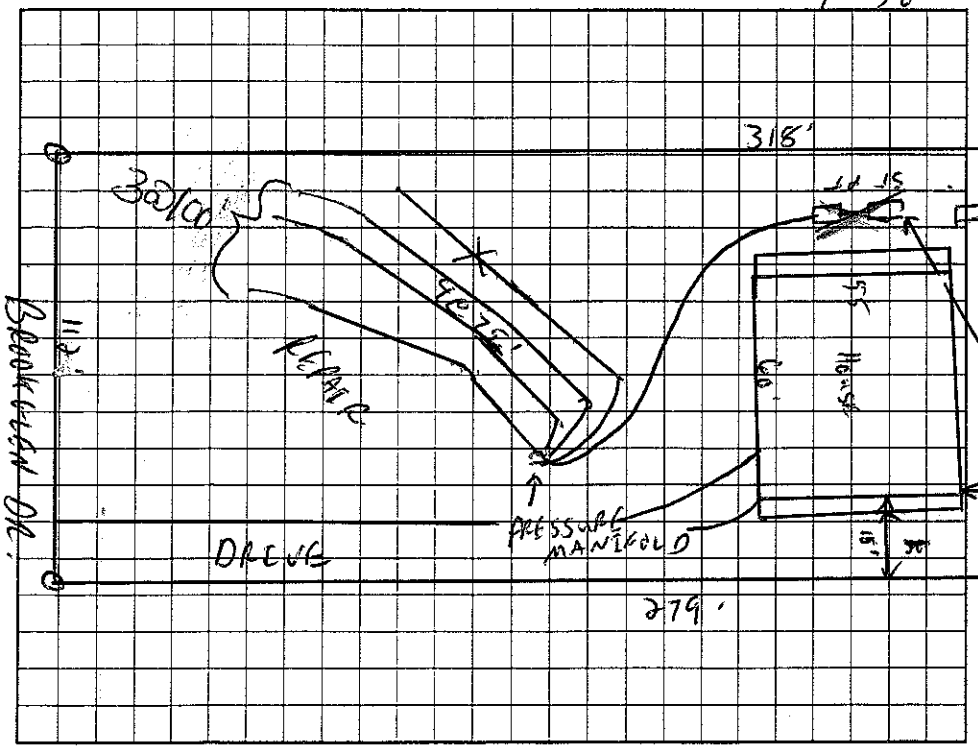
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

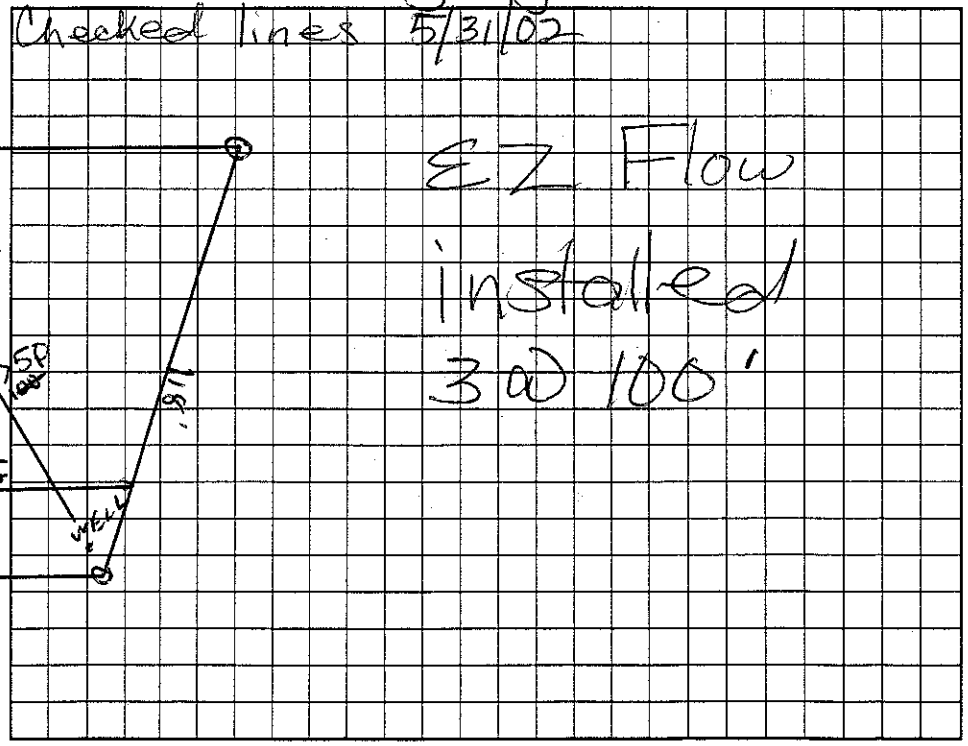
Comments:/Conditions: FRONT LOAD GARAGE

Comments:/Conditions: (POSSIBLE BASEMENT LOT)
Checked tanks 5/30/02
★ Note: Evaluated backhoe pit in tanks area 5/30/02, C/SC & Expansive Clay okay to decrease well to 50'

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 11-6-01

Improvement Permit by: C. [illegible] RS date 10/31/01

Authorization to Construct by: C. [illegible] RS date 12/21/01

Installed by: Tommy Frye RS

Operation Permit by: Marcia H Watson date 7/5/2002

Existing System Inspection by: _____ date _____

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