IREDELL COUNTY HEALTH DEPARTMENT

TATESVILLE 704-878-5305 330.00 Paid 400 MOORESVILLE 704-664-5281

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

PERMIT# 1199 PIN# ~~4677 35 7372~~ 7735 8125 DATE 4/11/02

OWNER OR CONTRACTOR Southern Living Homes PHONE: Business 704-933-7200 Home

ADDRESS 1310 N Cannon Blvd. Kannapolis, NC. 28083

LOCATION 150 E TR Alexanders Acres Rd. on (L) approx. 1 mile, just beyond old white house

SUBDIVISION Thomas Alexander BLOCK / SECTION LOT No LOT AREA 1.03Ac SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 3

Septic Tank: 1000 Gallons; STB 350 Date 3/20/02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5 @ 80' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth No

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

System Description: GRAVITY - CHP LAS - EZ LAY

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

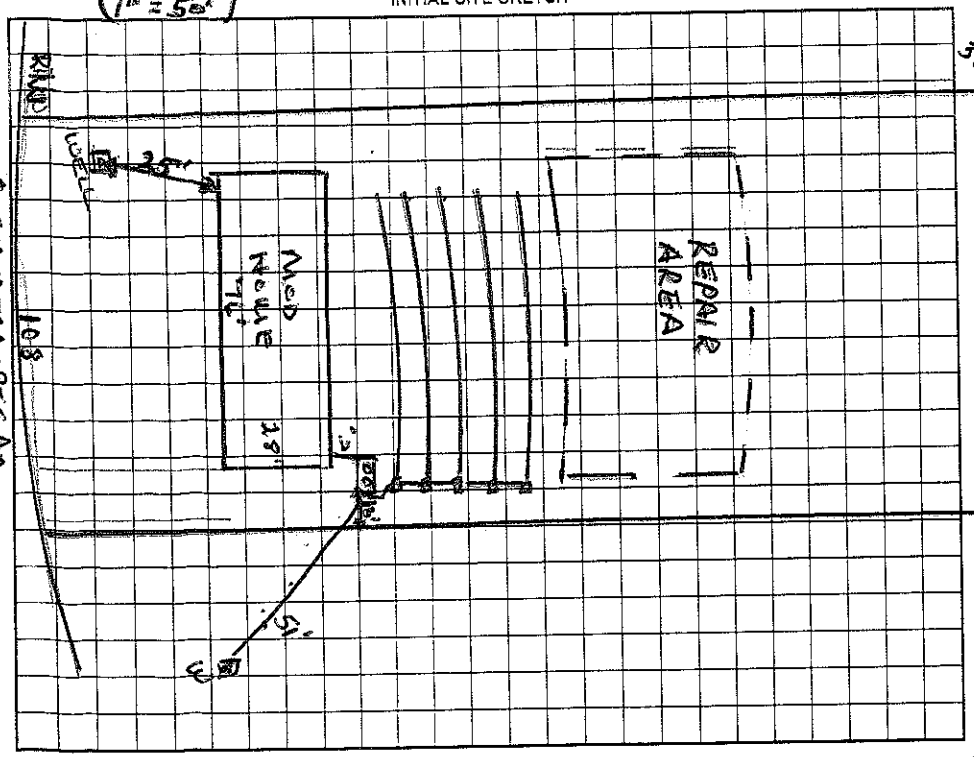
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

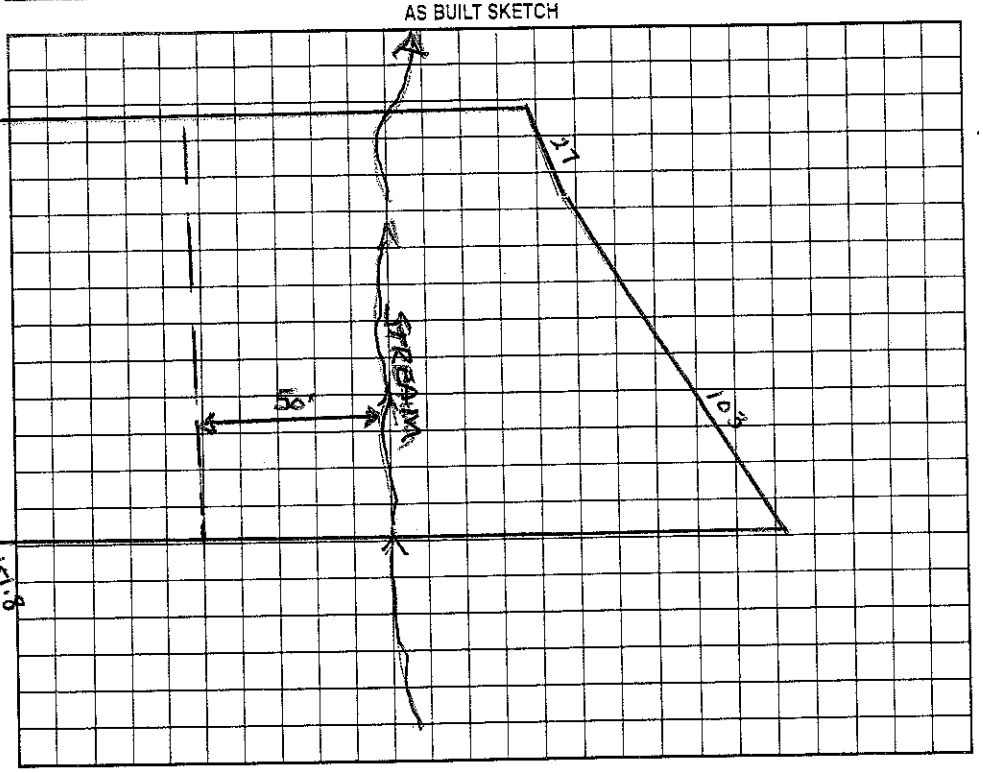
Comments:/Conditions: * 25% Reduced System size. Install footage shown on this permit.

Comments:/Conditions: Chamberd Plastic chambers used

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 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.

Carl Bradshaw date 4-12-02 Installed by: Piedmont Septic Tank

by: Wesley Sparks RS. date 4/11/02 Operation Permit by: Wesley Sparks RS. date 4/30/02

by: Wesley Sparks RS. date 4/11/02 Existing System Inspection by: date

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