IREDELL COUNTY HEALTH DEPARTMENT

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

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

12:00

PERMIT# 072737 PIN# 4679060816 DATE 4/27/98

OWNER OR CONTRACTOR David Brawley PHONE: Business Mobile 929-2840 Home 663-0196 Invoice 664-1091

ADDRESS 281 Williamson Rd Mooresville NC 28115

LOCATION Triplett Rd ON Rt past Confederate Rd (1/4 mile past Withrow Creek on left)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 12.92 Acres SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. 3

Septic Tank: 1000 Gallons; STB 1071 Date 1-7-2000

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 3 at 133' Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth 12"

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

System Description: Gravity Conventional

Repair System Description: Gravity Conventional

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

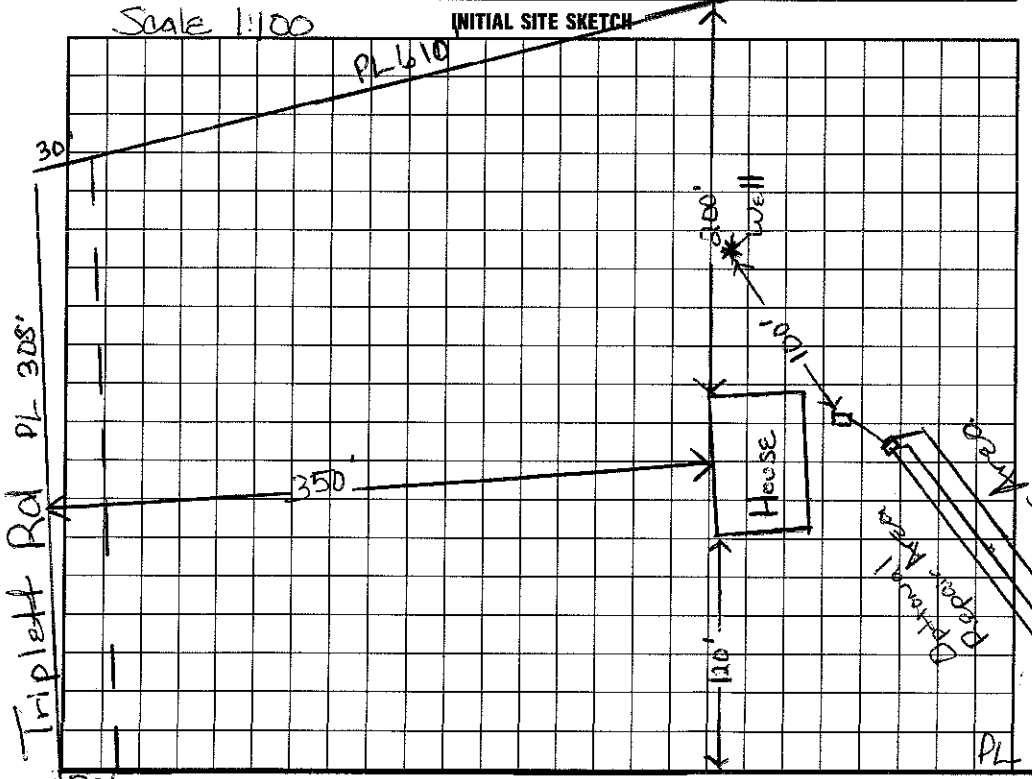
Comments:/Conditions: Keep Septic System at least 100' from well & 5' from House.

Comments:/Conditions: Filtered Riser installed

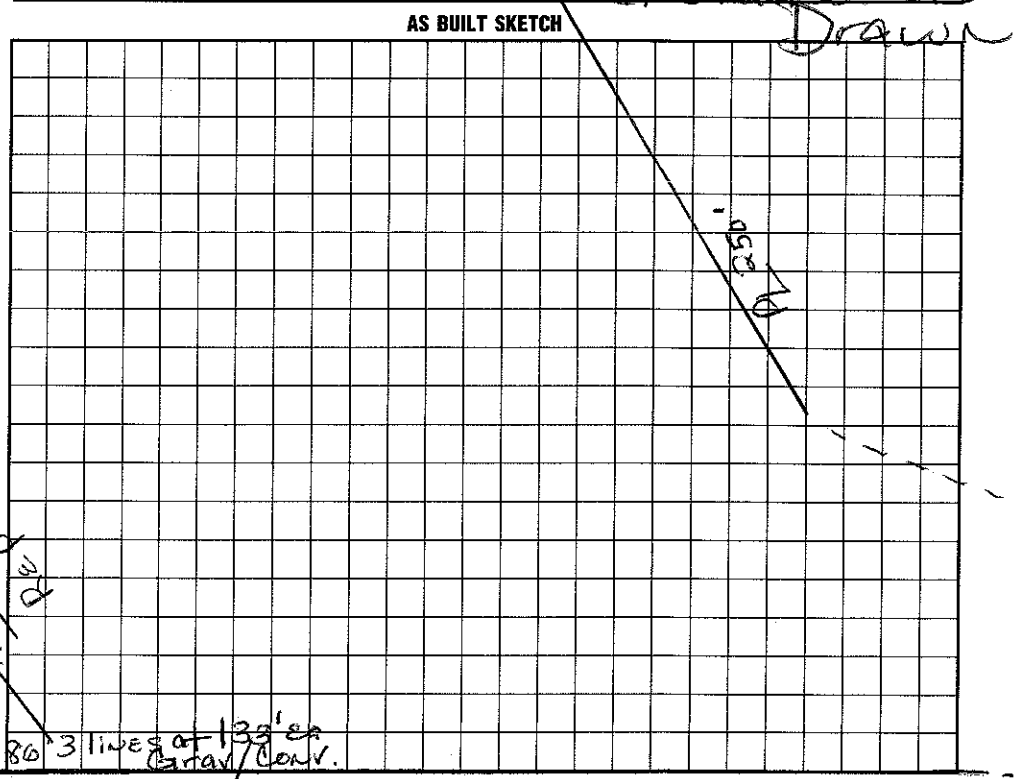
Installed as Drawn

INITIAL SITE SKETCH

Scale 1:100



AS BUILT SKETCH



I understand that this 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 5/5/98

Improvement Permit by: Maria H. H. Dotson date 4/27/98

Authorization to Construct by: Maria H. H. Dotson date 4/27/98

Installed by: Richard Abernathy

Operation Permit by: Maria H. H. Dotson RS. date 12/17/2000

Existing System Inspection by: _____ date _____

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