9:30.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 93017 PIN# ~~4679022978~~ PT 4679-11-3548 DATE 1/11/01

OWNER OR CONTRACTOR BEECHWOOD PARTNERS / NEW CONCEPT PHONE: Business 664-9080 Home

ADDRESS 225 ROLLING HILLS RD - MOORESVILLE

LOCATION SOUTH - TL TREPLETT - TL MALLARDWOOD - TL WOODBINE ON LT.

SUBDIVISION BEECHWOOD EST BLOCK / SECTION LOT 27 LOT AREA .71 AC SITE CLASS. RS DESIGN FLOW 360 GAD L.T.A.R. .3000/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 4-1-01

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4 @100' 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: PUMP SAME

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

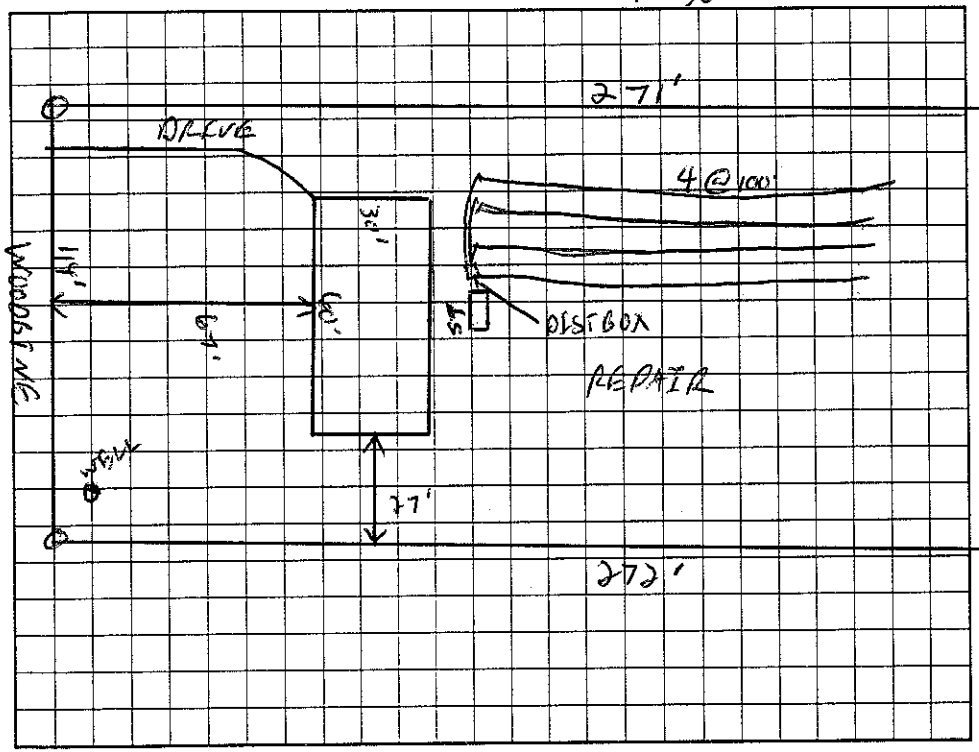
Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions:

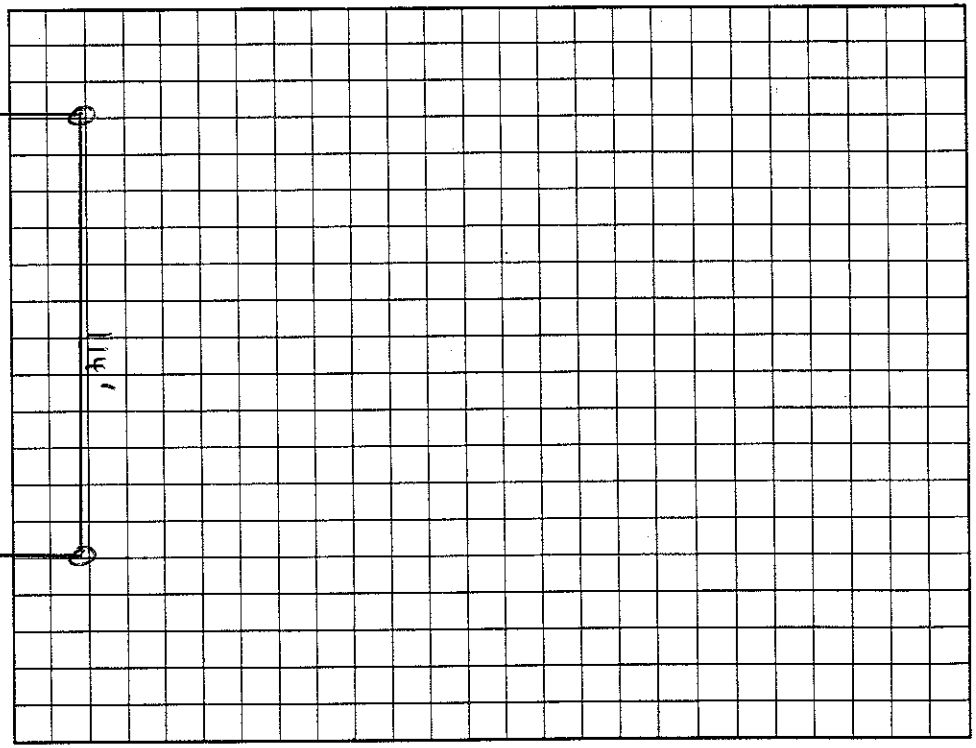
Comments:/Conditions: Installed Conventional lines as drawn.

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: date 1/29/01

Improvement Permit by: C. Ben Teem RS date 1/11/01

Authorization to Construct by: C. Ben Teem RS date 6/15/01

Installed by: A-1 Backhoe

Operation Permit by: Mark Watson RS date 6/29/2001

Existing System Inspection by: date

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