IREDELL COUNTY HEALTH DEPARTMENT

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

25.00 Paid -3.00

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

PERMIT# 093930 PIN# 4685 20 2944 PT. DATE 2/21/02

OWNER OR CONTRACTOR Thornton Brooks Jr. PHONE: Business 704-892-7373 Home

ADDRESS 19701-A W Catawba Ave Cornelius, NC. 28031

LOCATION 1365 TL Patterson Farm Rd. on (R) just past Rustic Rd on (R) 4685-20-~~0798~~-3998

SUBDIVISION Patterson Creek BLOCK / SECTION LOT 4 LOT AREA 18.3 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 312 Date 2-28-02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1920 Linear Feet 640

No Lines 5 @ 128' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth 12"

[X] New System [ ] Repair System Type: I. II. III. IV. V. VI

System Description: DropBox Conventional

Repair System Description: Same

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 4

[ ] Mobile Home No. Bathrooms 3

[ ] Business No. Employees

[ ] Other

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

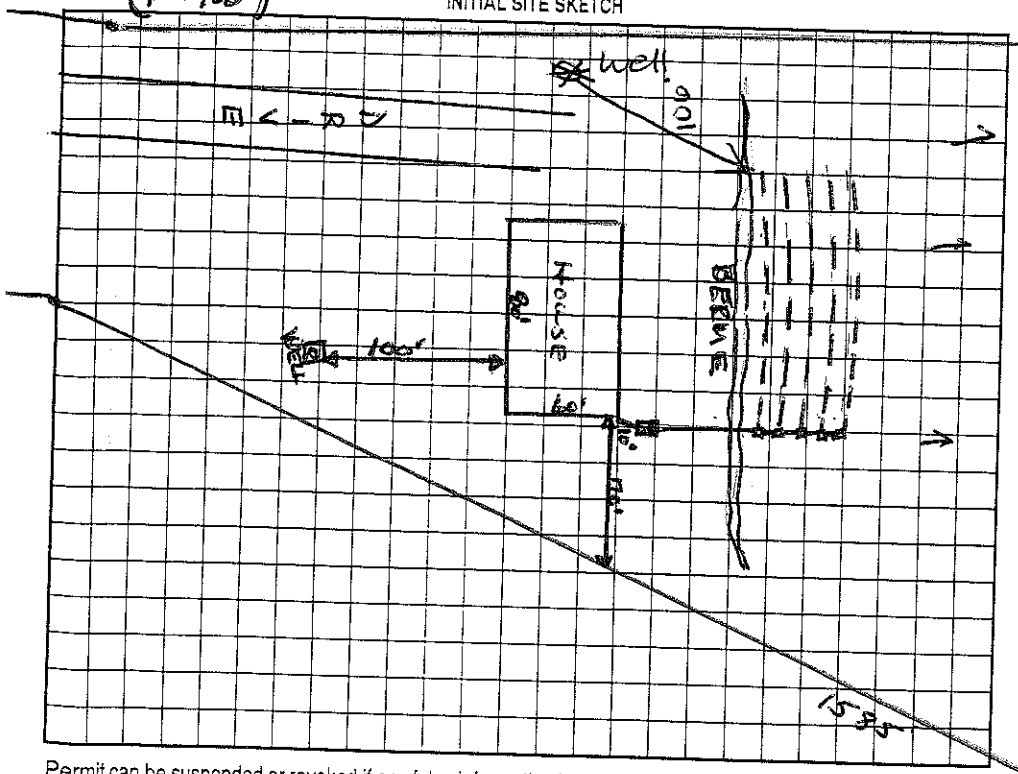
Water Supply: [X] Individual [ ] Public [ ] Community

Comments/Conditions: Note: Drive on other Side

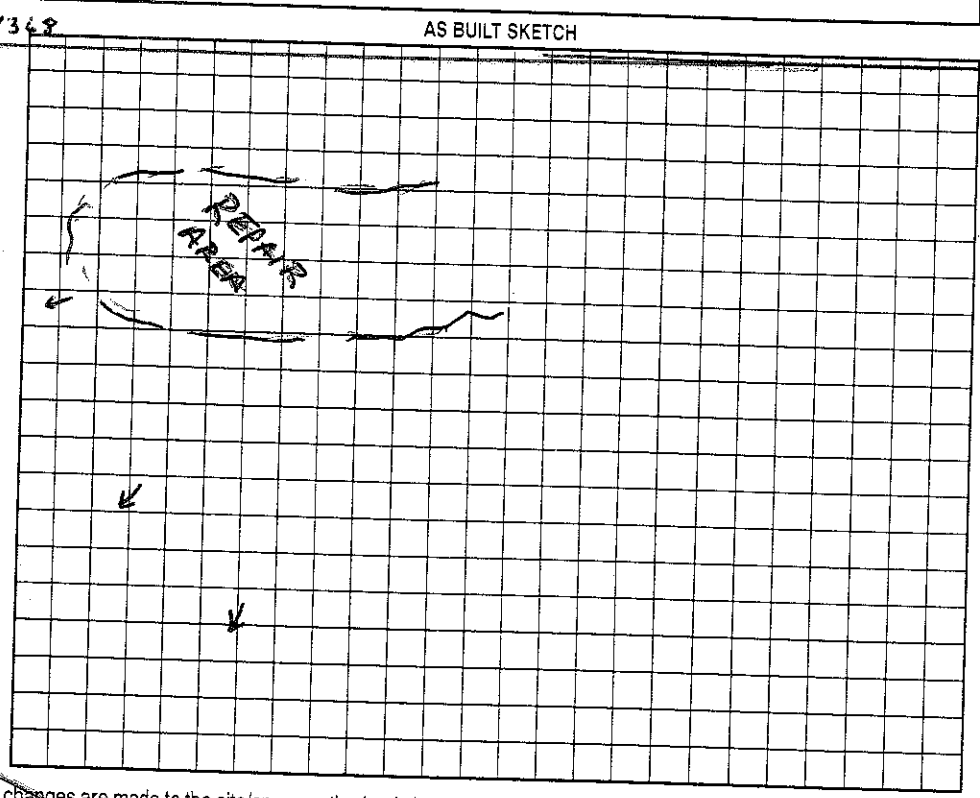
Comments/Conditions: Installed as Drawn, last line a little deep.

(1" = 100')

INITIAL SITE SKETCH



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: Lee Baker date 3-1-02

Improvement Permit by: Wesley Sparks RS. date 2/21/02

Authorization to Construct by: Wesley Sparks RS. date 2/21/02

Installed by: E.J. Ervin

Operation Permit by: Maurice H. Dotson RS. date 8/26/2002

Existing System Inspection by: date

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