IREDELL COUNTY HEALTH DEPARTMENT

CI 125.00 Paid

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

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

PERMIT# ~~10079~~ 104080 PIN# 4705-76-~~5005~~ 5308 DATE 1/15/02

OWNER OR CONTRACTOR JOHNNY CRAVER PHONE: Business 663-6220 Home

ADDRESS 130 LAZY LANE - MOORESVILLE NC 28117

LOCATION 64 N- TL CIPPARD FARM- TL STONES EDGE, TL GEMSTONE ON LT

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 6 LOT AREA .67AC SITE CLASS PS DESIGN FLOW 360 GPD L.T.A.R. .3600/Area

Septic Tank: 1000 Gallons; STB 1012 Date 8-24-02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3@100' 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: CRATER 2500 REDUCTION

Repair System Description: LP 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

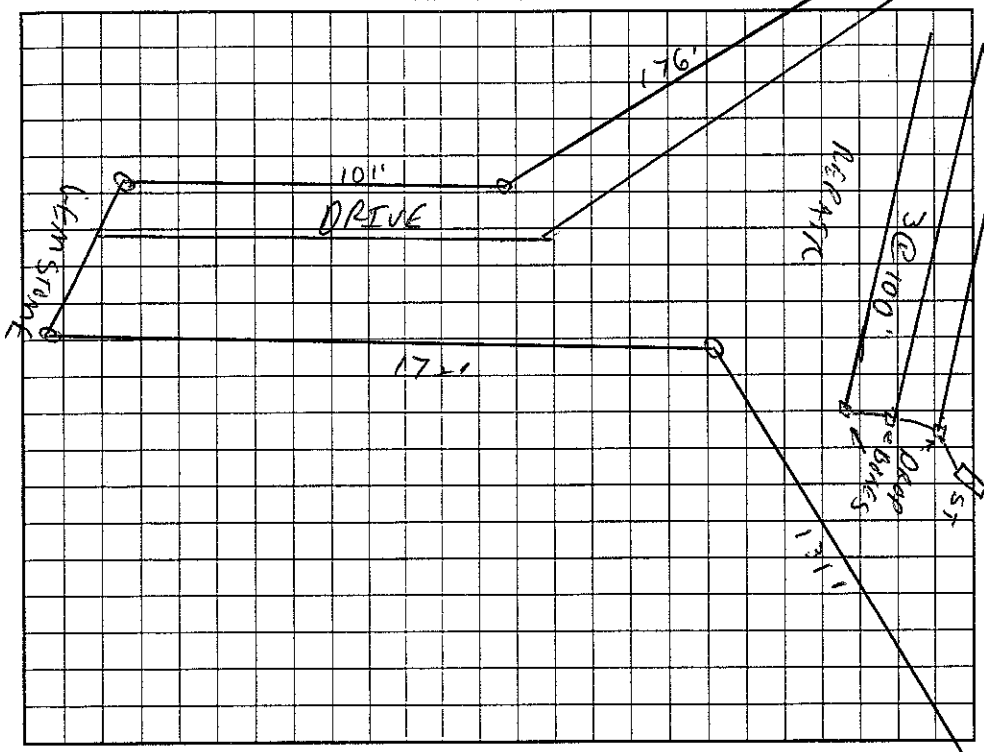
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

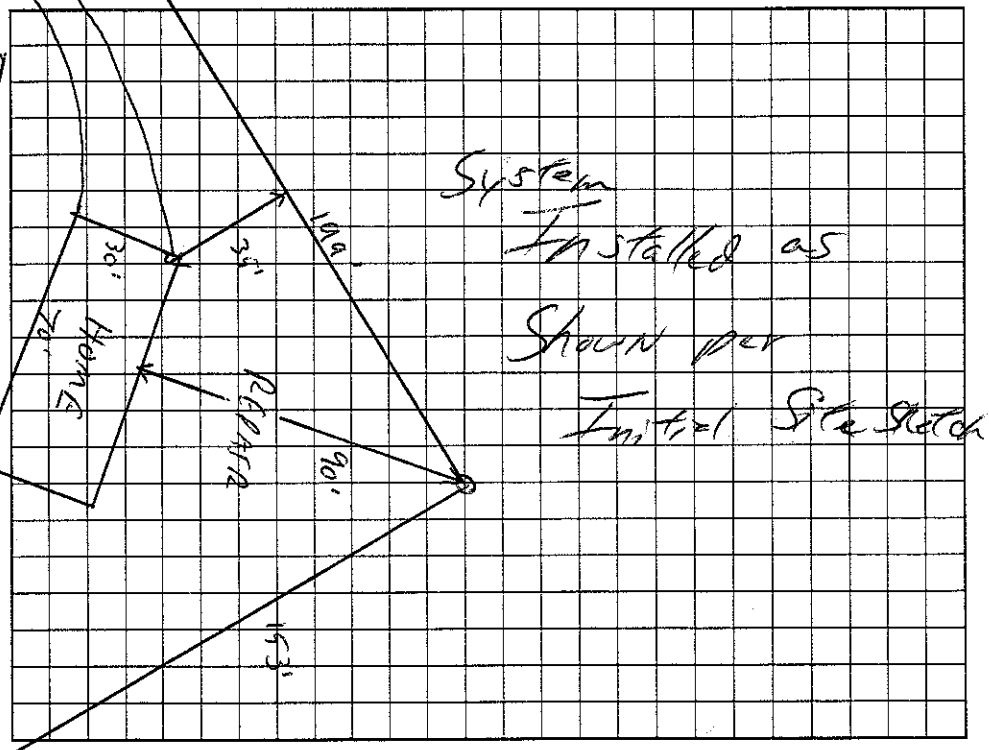
Comments:/Conditions:
- Tuff-Tite filter Installed
- S.T. Marker Installed
- 48 Infiltrator Chambers Installed

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: Steve Lyle date 1-18-02 Installed by: A-1 Backhoe

Improvement Permit by: C. L. Tucker REHS date 1/15/02 Operation Permit by: William O. Johnson date 4/15/03

Authorization to Construct by: William O. Johnson date 3/21/03 Existing System Inspection by: date

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