IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 130.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 108445 PIN# 4705-76-9110 DATE 9/19/04

OWNER OR CONTRACTOR STONES EDGE INC PHONE: Business 663-2220 Home

ADDRESS 130 LAZY LANE MOORESVILLE, NC 28117

LOCATION 64 WEST - TL LIPPARD FARM - TL STONESEDGE - TL GRANSTONE - ON RT

SUBDIVISION STONESEDGE BLOCK / SECTION LOT 23 LOT AREA .641Ac SITE CLASS. PS DESIGN FLOW 450GPD L.T.A.R. .36 10/Ft

Septic Tank: 1000 Gallons; STB ~~1012~~ Date 4-25-04

Pump Tank: Gallons; PT 1012 Date

Pump Make: Model Serial No.

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

No Lines 5 @ 80' 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: GRAVITY 25% REDUCTION

Repair System Description: LP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

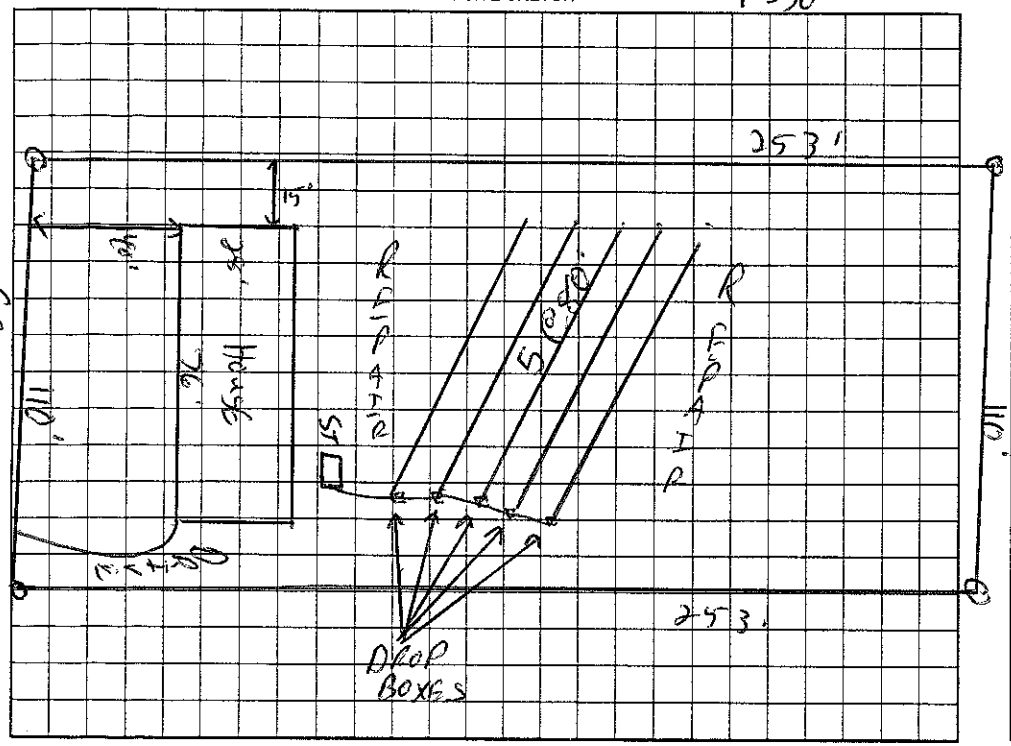
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

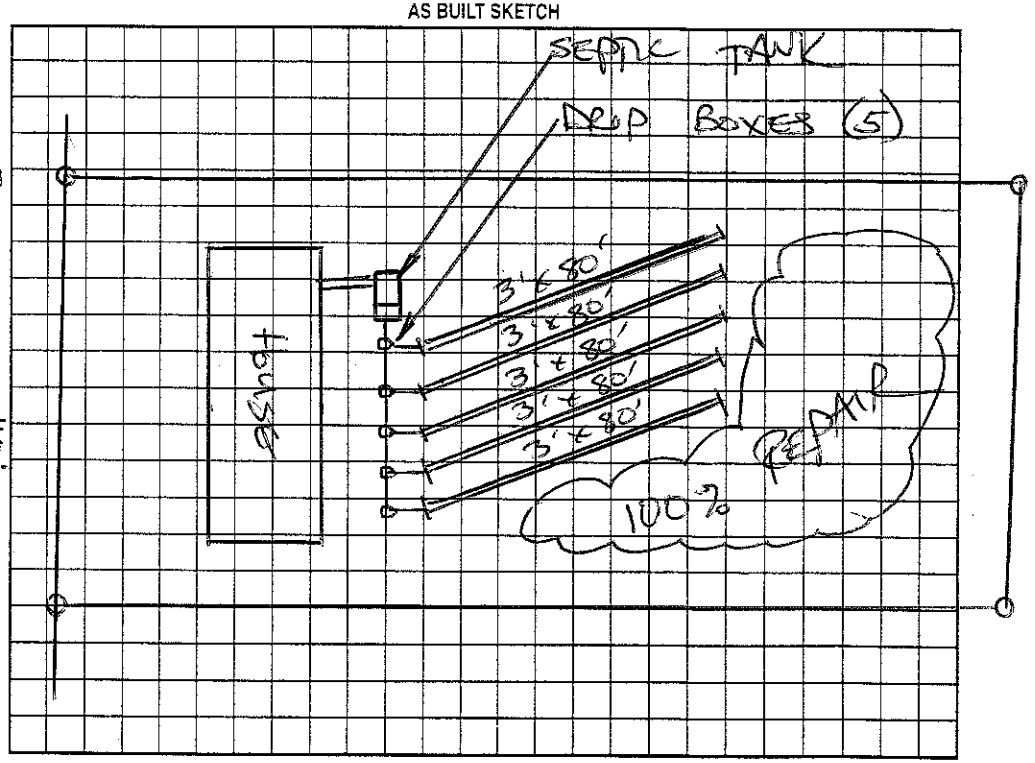
Comments/Conditions:

Comments/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FILTER ② SYSTEM INSTALLED ON CONTOUR AS SHOWN BELOW.

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: Tina Johnston date 9-17-04

Improvement Permit by: C. Hayes RS date 9/19/04

Authorization to Construct by: C. Hayes RS date 9/19/04

Installed by: A-1 BACKHOE

Operation Permit by: STEVE HEDRICK date 10-1-04

Existing System Inspection by: date

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