IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (CK) 130.00 Pg. 9 MOORESVILLE 704-664-5281

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

PERMIT# 108439 PIN# 4705.86-4065 DATE 1/20/05

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

ADDRESS 130 CAZI LANE · MOORESVILLE NC 28117

LOCATION 64 WEST - TL LIPPARD FARM - TL STONESEDGE - TL GEMSTONE - OFF RT.

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 18 LOT AREA .625AC SITE CLASS. IS DESIGN FLOW 360GPD L.T.A.R. .36/.36

Septic Tank: 1000 Gallons; STB 1012 Date 10-25-04
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 4@75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other

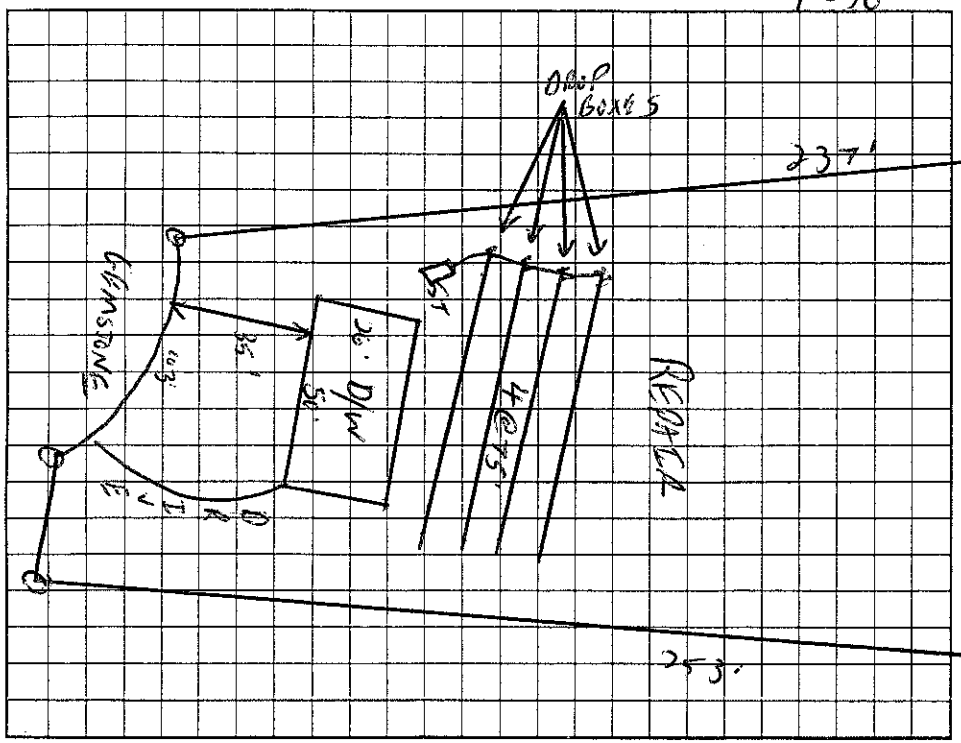
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

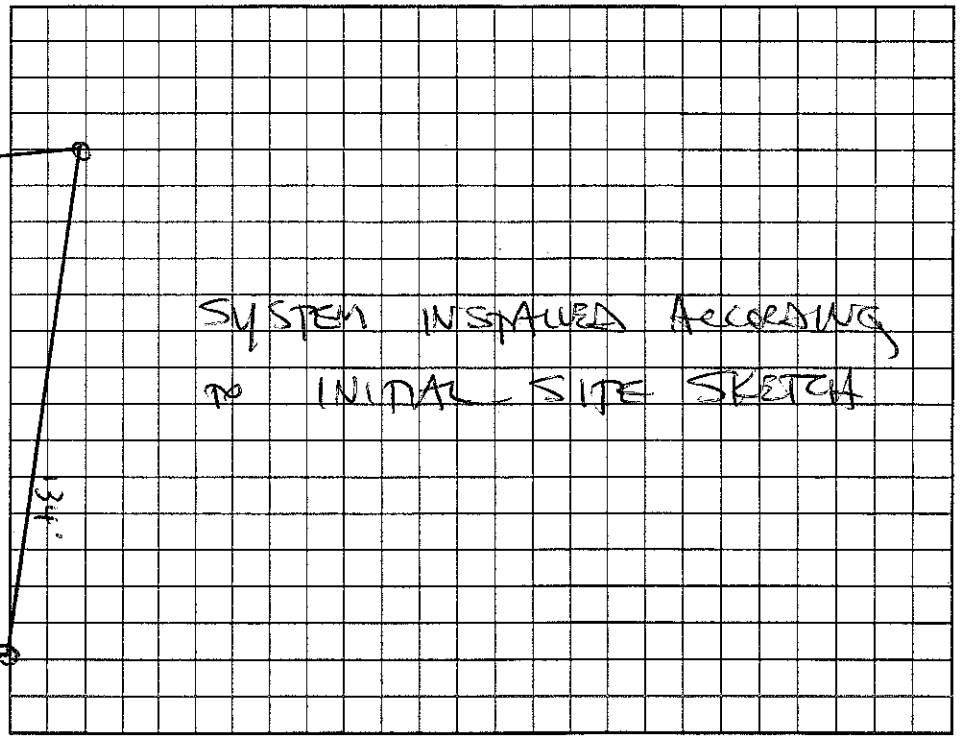
Comments/Conditions:

Comments/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "TUFFITE" FILTER ② SYSTEM INSTALLED DURING PERIOD OF WET SOIL CONDITIONS.

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: Dina Johnston date 1-21-05 Installed by: A-1 BACKHOE

Improvement Permit by: C. Sz RS date 1/20/05 Operation Permit by: STEVE HENDRICK date 2-1-05

Authorization to Construct by: C. Sz RS date 1/20/05 Existing System Inspection by: date

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