IREDELL COUNTY HEALTH DEPARTMENT

CI

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

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

PERMIT# 104564 PIN# 4705 96 4545 DATE 1/29/03

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

ADDRESS 130 LAZY LANE MOORESVILLE NC 28117

LOCATION 64 W - TL LIPPARD FARM - TL STONES EDGE - HEMSTONE - TREFLON - TL TITANIUM - ON LT

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 60 LOT AREA .151AC SITE CLASS PS DESIGN FLOW 480GPD L.T.A.R. .36 POINT

Septic Tank: 1000 Gallons; STB 1012 Date 9-30-03

Pump Tank: Gallons; PT 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 NA

☑ 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

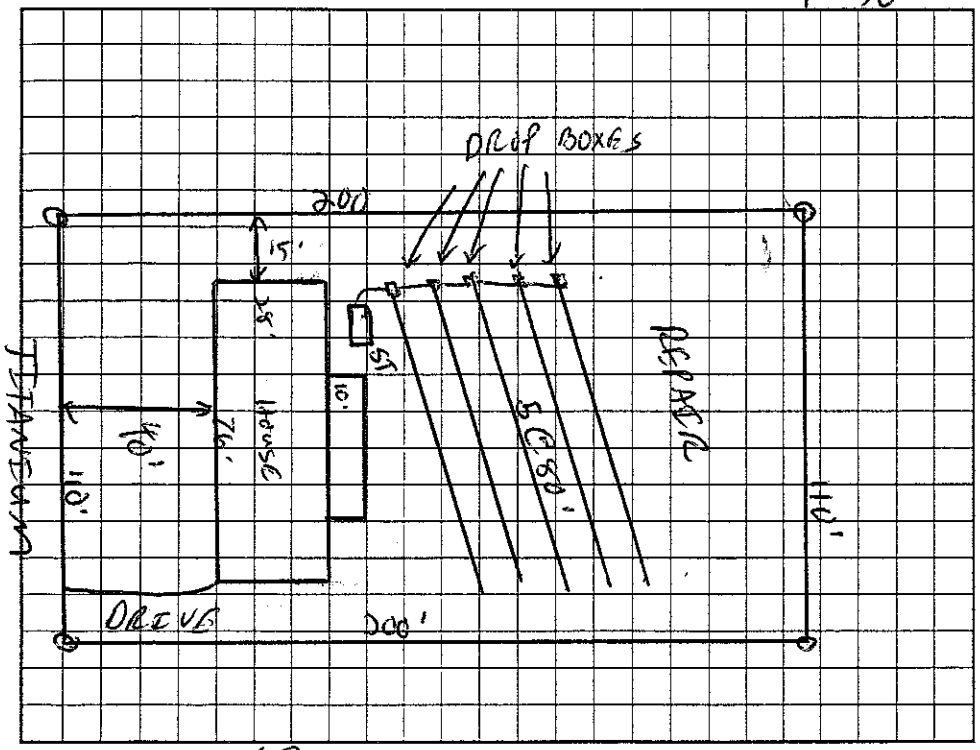
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

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- Tuff - Tite Filter + ST marker Installed
- 64 Infiltrator Chambers Installed

INITIAL SITE SKETCH 1" = 50'



AS BUILT SKETCH

Installed As Shown per Initial Site 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

Improvement Permit by: CS date 1/24/03

Authorization to Construct by: CS date 1/24/03

Installed by: Craig Thompson

Operation Permit by: William C. Johnson date 2/25/04

Existing System Inspection by: date

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