IREDELL COUNTY HEALTH DEPARTMENT

CI 130.00 Paid

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

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

PERMIT# 108 446 PIN# 4705966162 DATE 1/13/03

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

ADDRESS 130 LAZY LANE MOORESVILLE NC 28117

LOCATION 64W- TL LIPPARD FARM - TL STONES EDGE - TL GEMSTONE - TR ZIRCON - TL TITANIUM

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 85 LOT AREA .551AC SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .36PD/FT

Septic Tank: 1500 Gallons; STB 1011 Date 12-08-02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1500 Linear Feet 500

No Lines 5@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: GRAVITY 25% REDUCTION

Repair System Description: LP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 5 No. Bathrooms 3 No. Employees

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

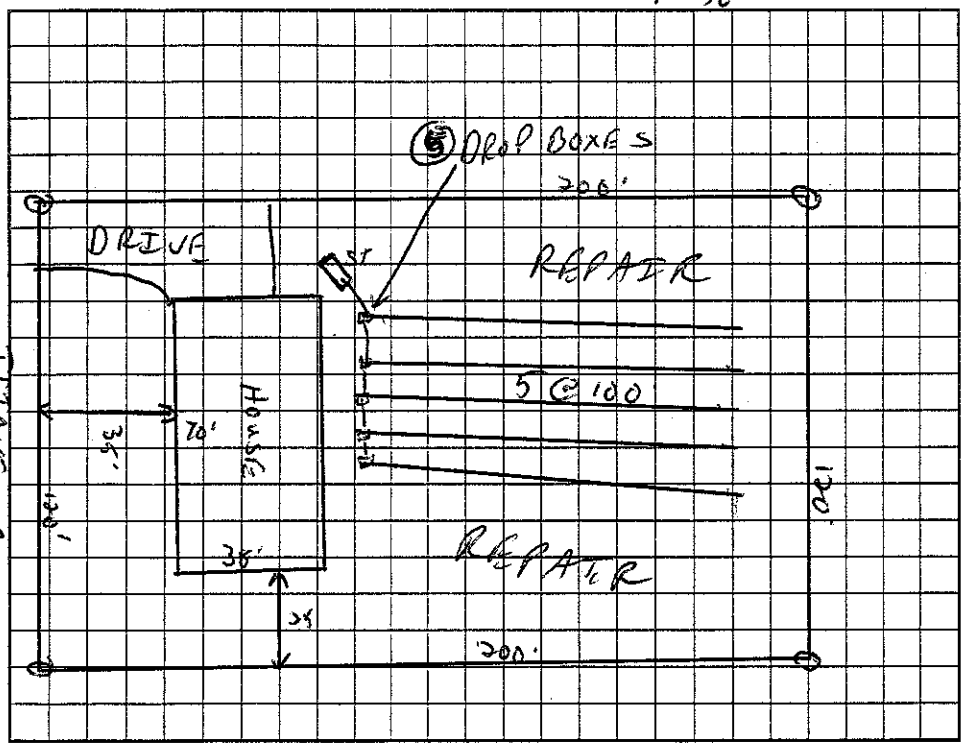
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

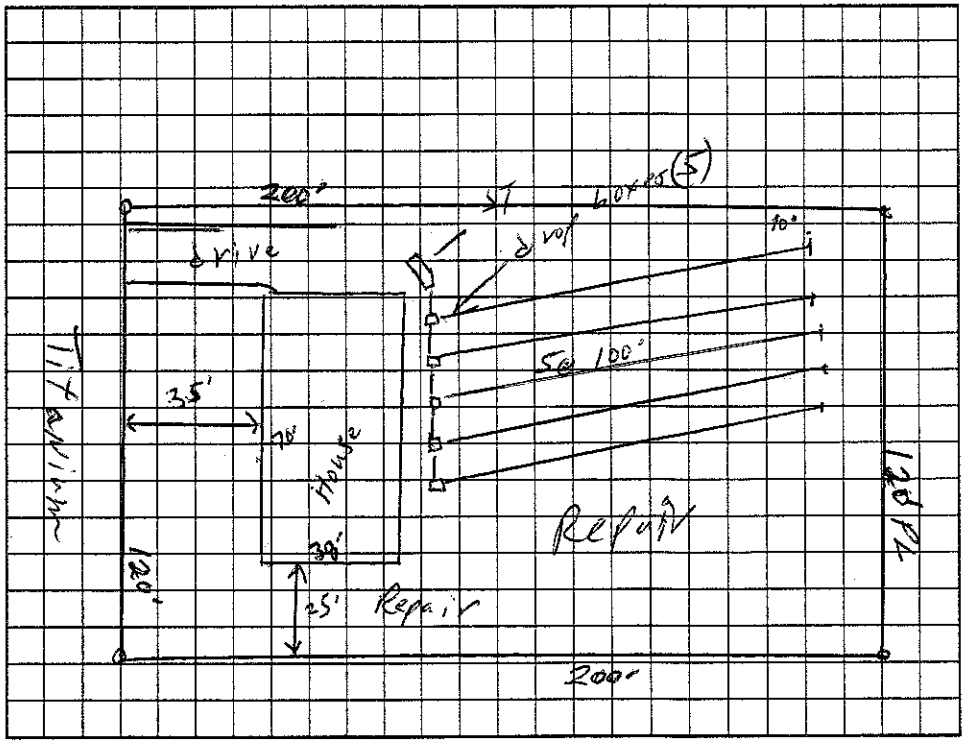
Comments:/Conditions:

- Poly lok filter & Septic Tank Marker Installed
- Installed Infiltrator Chambers (80) qty

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: Janice B. Graham date 1/31/03 Installed by: Craig Thompson

Improvement Permit by: C. [illegible] KS date 1/13/03 Operation Permit by: William O Johnson date 2/6/02

Authorization to Construct by: C. [illegible] KS date 1/13/03 Existing System Inspection by: date

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