IREDELL COUNTY HEALTH DEPARTMENT

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

CI

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

PERMIT# 104517 PIN# 4705971119 DATE 4/21/03

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

ADDRESS 130 LAZY LN MOORESVILLE NC 28117

LOCATION 64 W - TL LEPPARD FARM - TL STONES EDGE - TL GEMSTONE - TR ZERION - TL TITANIUM ON LT

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 65 LOT AREA 2.58AC SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .36-10/172

Septic Tank: 1000 Gallons; STB 1012 Date 9-11-02

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 400

No Lines 6@5'@50' 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: SAME

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

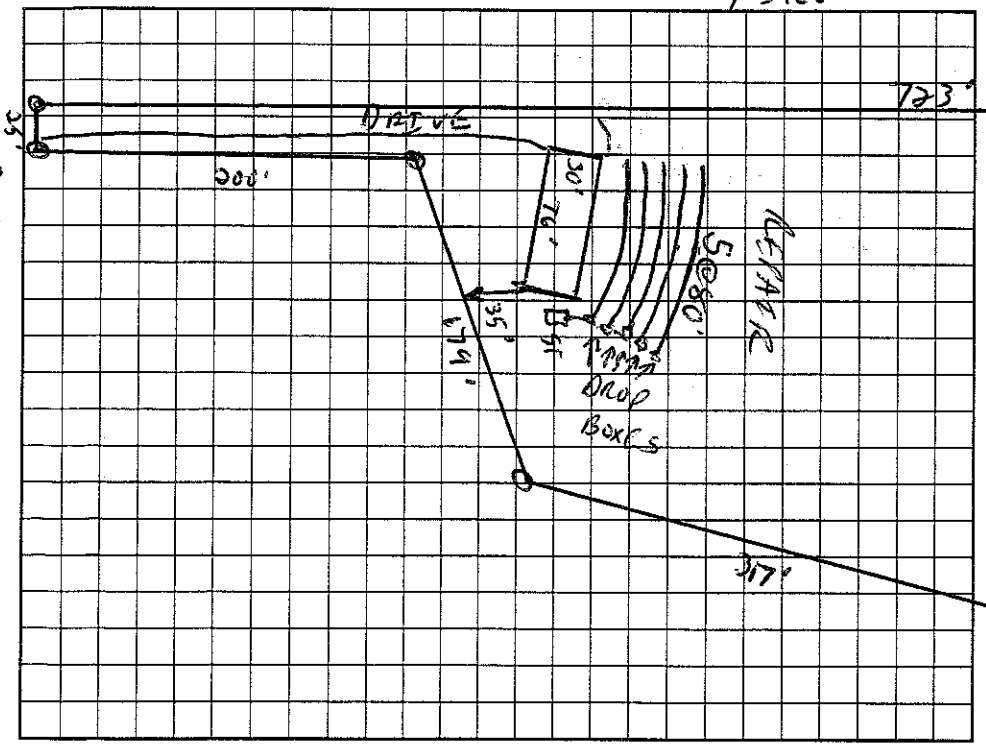
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

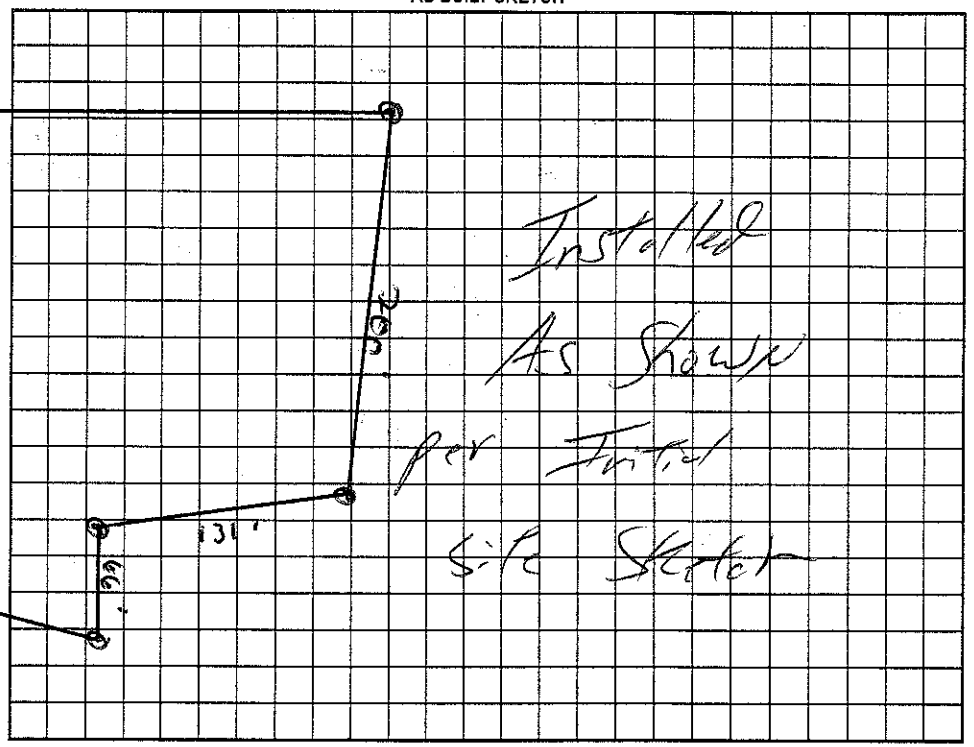
Comments:/Conditions:

- Installed 64 Infiltrator Chambers
- Tuff-Tite Filter Installed
- S.T marker Installed

INITIAL SITE SKETCH 1" = 100'



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: Donald A Sandel date 22 April 03 Installed by: A-1 Backhoe

Improvement Permit by: C. [illegible] RS date 4/21/03 Operation Permit by: William O Johnson date 4/28/03

Authorization to Construct by: C. [illegible] RS date 4/21/03 Existing System Inspection by: date

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