CI called 6-26-07 @ 11:20

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14295 PIN# 4711528193-00-B 626034 DATE 6-8-07

OWNER OR APPLICANT Michael & Sonya Leonard PHONE: Business 704-902-4227 Home 704-528-4980

ADDRESS 181 ISLAND TERRACE RD Statesville NC 28677

LOCATION BUFFALO SHOALS (L) LAUREL COVE (L) AT 317 LAUREL COVE RD Follow Drive Behind 1st Home Then Way Back

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .3

Septic Tank: 1500 Gallons: STB 500 Date 4-19-07
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 2000 Linear Feet 667'
No Lines 5x133 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 22"

☒ New System ☐ Repair ☐ Expansion System Type: (II) III IV V VI
System Description: GRAVITY CONVENTIONAL
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 5
☐ Mobile Home No. Persons 3
☐ Business No. Employees _____
☐ Other _____

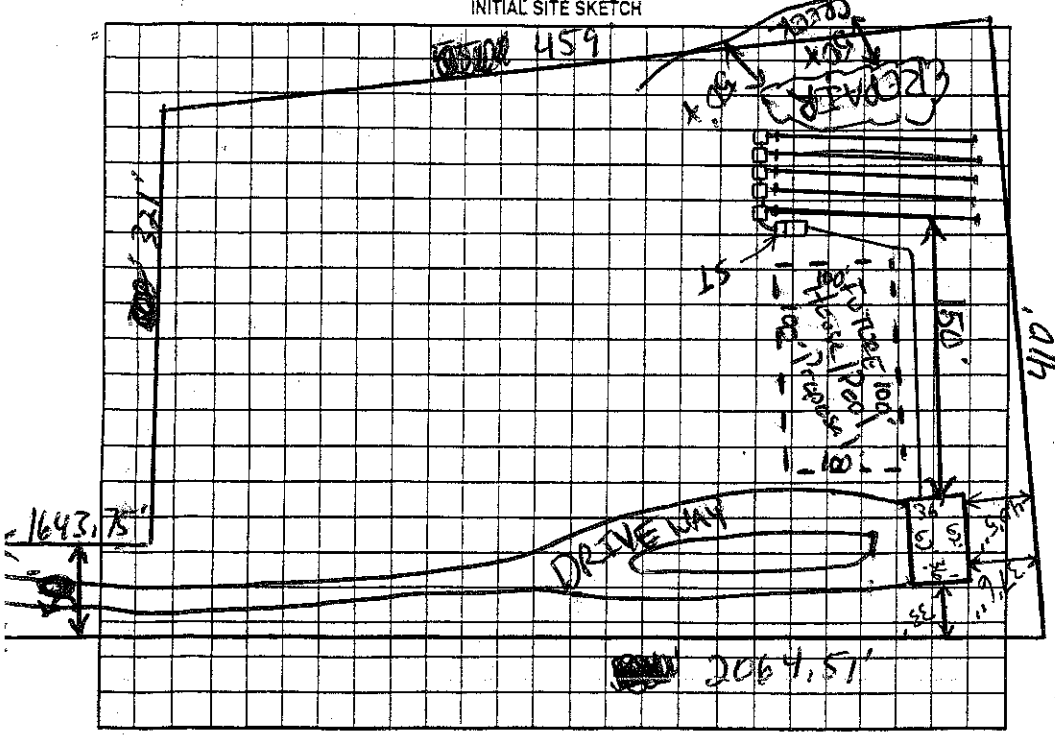
Water Supply: ☒ Individual ☐ Public ☐ Community

☒ Gravity ☐ Pressure ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

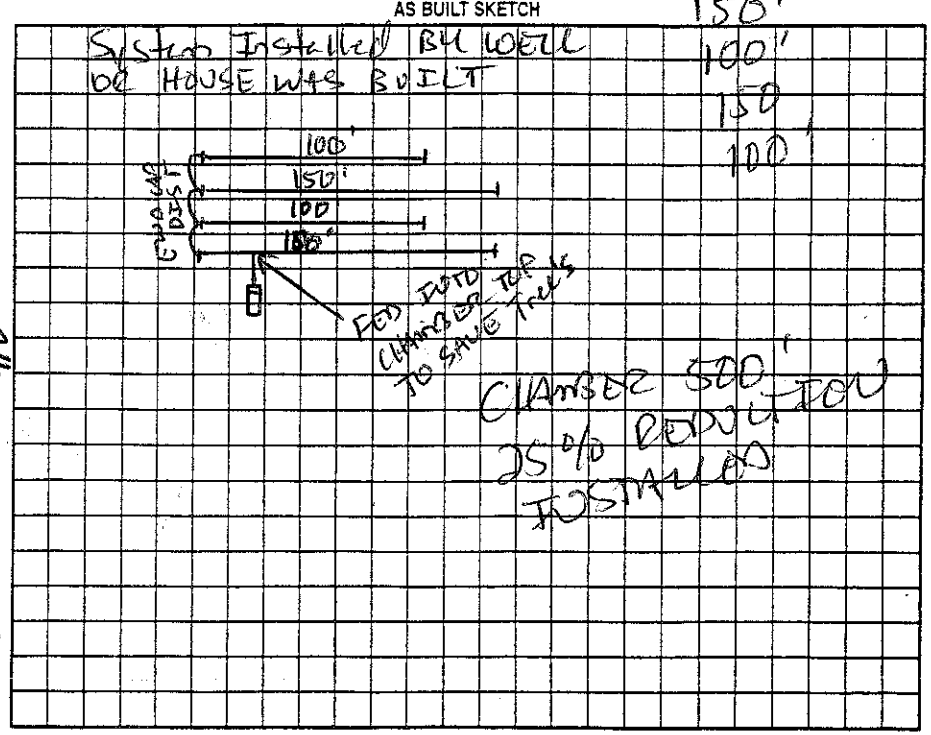
Comments/Conditions: (1) ID DN/4 UNTIL PLAT OF LAND IS SUBMITTED (2) INSTALL LINES on Contours & MEET MIN SETBACKS (3) Initial Building Will BE A 2 Bedroom, System Sized for

Comments/Conditions: 5 BEDROOMS For Future EXPANSION. (4) Septic Supply Lines must be 10' From Pool. (5) Septic TANK & Drain Lines must be 15' From Pool.

INITIAL SITE SKETCH



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: Michael D Leonard date 6-26-07 Installed by: A-1 BACKHOE

Improvement Permit by: _____ date 6-8-07 Operation Permit by: _____ date 8-13-07

Authorization to Construct by: _____ date 7/25/07 Existing System Inspection by: _____ date _____

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