IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 155.00 Pd. MOORESVILLE 704-664-5281

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

PERMIT# 104566 PIN# ~~4715~~ 4715070168 DATE 3/13/02

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

ADDRESS 130 LAZY CANE - MOORESVILLE NC 28117

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

SUBDIVISION STONES EDGE BLOCK / SECTION LOT 73 LOT AREA .55 SITE CLASS PS DESIGN FLOW 360GPD L.T.A.R. .36 PD/FT

Septic Tank: 1000 Gallons; STB 312 Date 3-15-02
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 NA

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

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

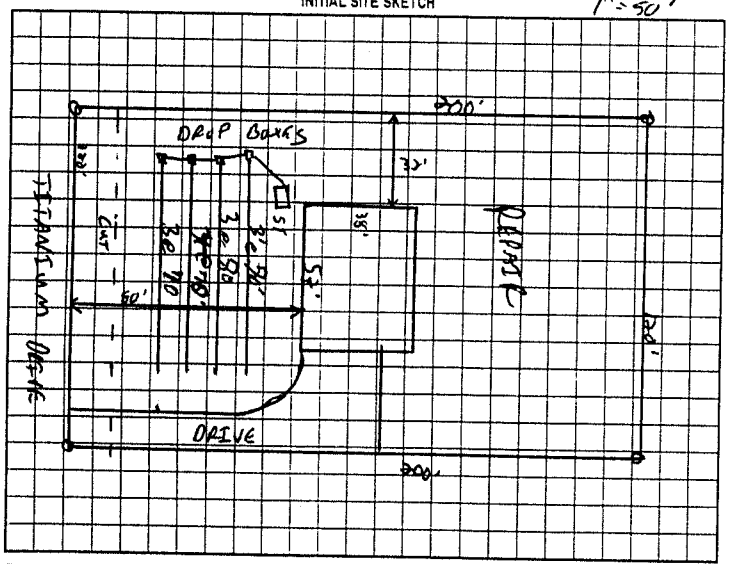
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ~~☐ Public~~ ☐ Community

Comments:/Conditions:

Comments:/Conditions: - Label filter Installed
- Septic Tank Marker Installed
- Installed 300 FT of E Zee Lay System

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 4-11-02

Improvement Permit by: C. Hicks date 3/13/02

Authorization to Construct by: C. Hicks date 3/13/02

Installed by: Larry Tucker

Operation Permit by: William O. Johnson date 4/17/02

Existing System Inspection by: date

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