IREDELL COUNTY HEALTH DEPARTMENT CI

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

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

PERMIT# 115044 PIN# 4916-74-6406.1 DATE 9/10/03

OWNER OR CONTRACTOR Lighthouse Independent Methodist Church PHONE: Business — Home (704) 528-7228

ADDRESS 740 old Farm Rd. Statesville NC 28677

LOCATION Hwy 115 N, (2) Scotts Creek Rd, property on left past Little Farm Rd.

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA _____ SITE CLASS. V5 DESIGN FLOW 375 L.T.A.R. .35

Septic Tank: 4000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1072 Linear Feet 360

No Lines 5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

☒ New System ☐ Repair System Type: I (II) III, IV, V, VI

System Description: Gravity Conventional

Repair System Description: Pump 25% reduction

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms ____

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☒ Other Church - 125 members

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

Water Supply: ☐ Individual ☒ Public ☐ Community

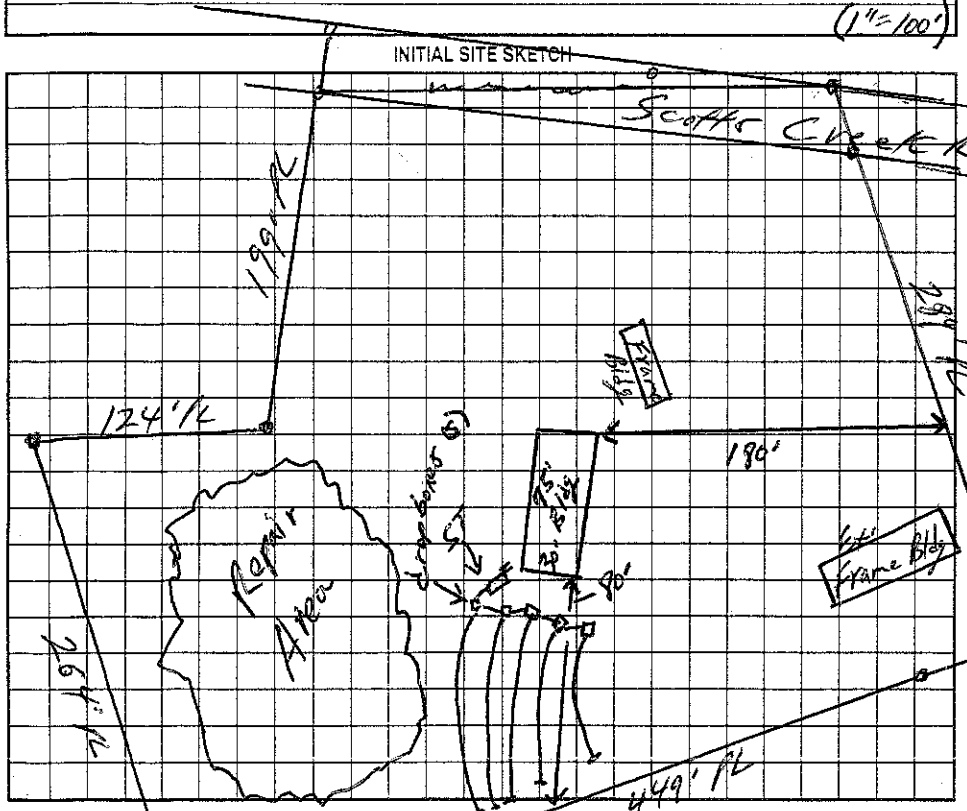
Comments:/Conditions: (1) Install lines on contour (2) Maintain proper setbacks (3) Do not install when wet.

Comments:/Conditions:

Yellow Filter

ST marker

INITIAL SITE SKETCH



AS BUILT SKETCH

17 chambers each line
4 lines

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: William C Shaver date 9/10/03 Installed by: Steve Jordan

Improvement Permit by: William C. Johnson date 9/10/03 Operation Permit by: James Clontz date 10/3/06

Authorization to Construct by: Steve Hedrick date 3-28-06 Existing System Inspection by: _____ date _____

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