IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 16095 PIN# 4726-02-6522 DATE 10/10/03

OWNER OR CONTRACTOR General Contract Services Inc PHONE: Business (704) 620-0000 Home —

ADDRESS P.O. Box 4253 Mooresville N.C. 28117

LOCATION ~~Hwy 21 S~~ Scotts Creek Road, (L) Nathanial Grace Drive, last lot on left

SUBDIVISION Celtic Ridge BLOCK / SECTION — LOT 16 LOT AREA .459 Ac. SITE CLASS. 15 DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 825 Date 10-13-03
Pump Tank: 1000 Gallons; PT 302 Date 8-9-03
Pump Make: Zoeller Model N98 69 to Serial No. —
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 360
No Lines 5 @ 72 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Pump, 25% Reduction
Repair System Description: Pump, Low Pressure Panel
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees —
☐ Other

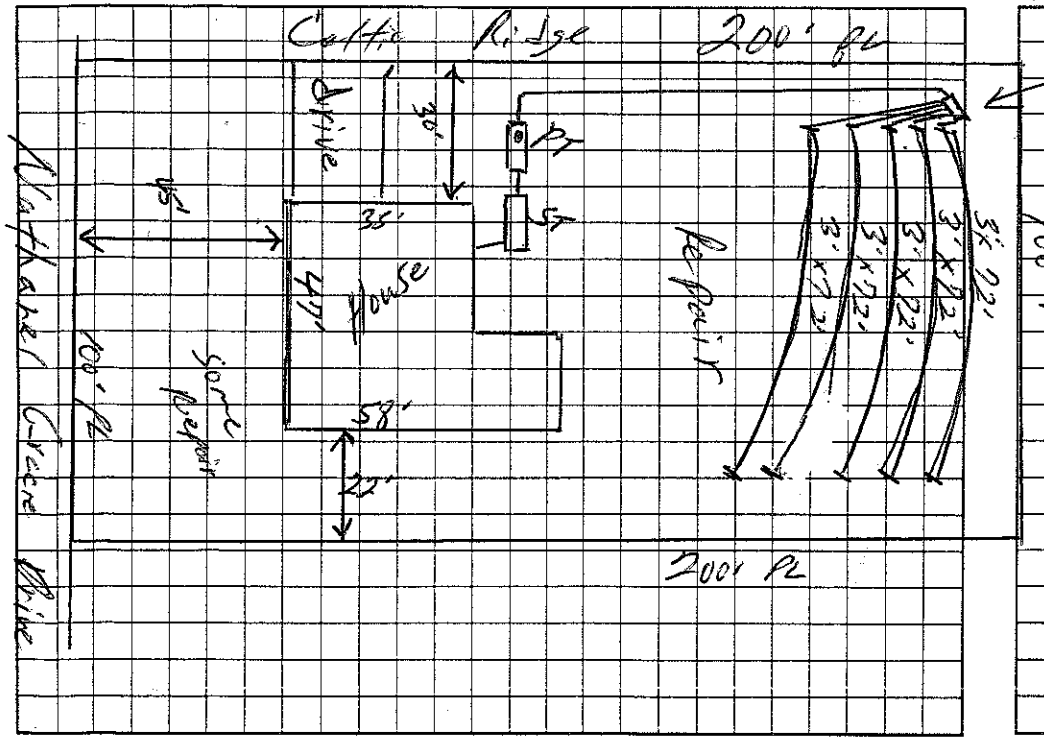
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

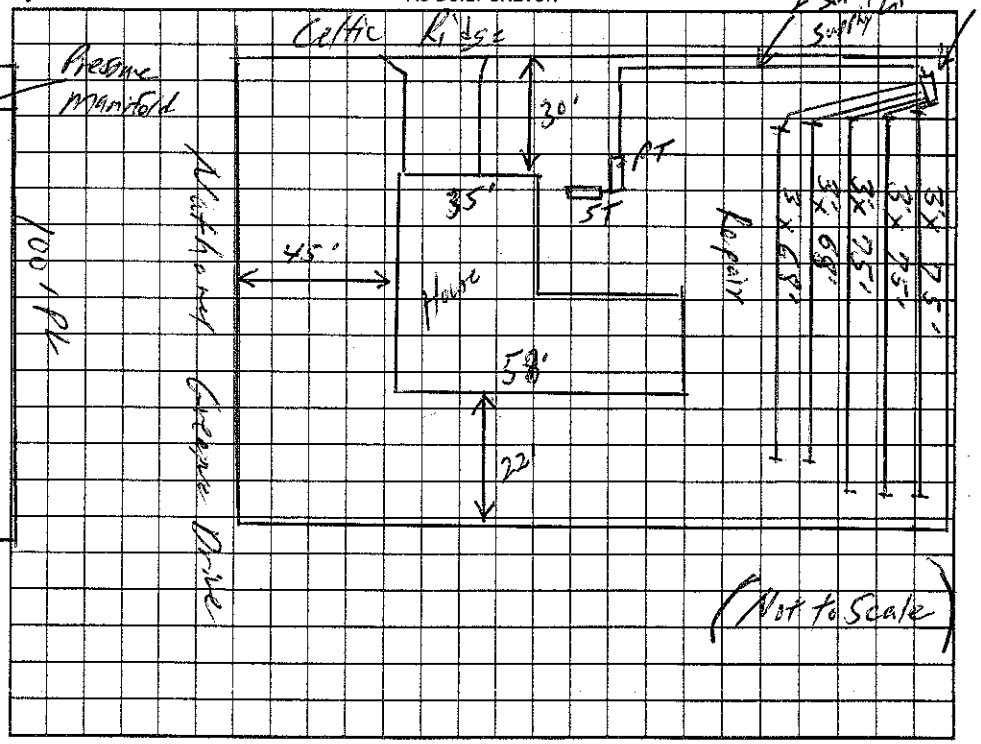
Comments:/Conditions: ① Maintain proper set backs

Comments:/Conditions: - poly lok filter Installed
- 5# Infiltrator Chambers Installed, pressure check okay
w/ V.I.D ELECTRIC + ALARM 11-17-04

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: _____ date 10-16-03 Installed by: Rowan Septic (11/26/03)

Improvement Permit by: William O. Johnson date 10/10/03 Operation Permit by: _____ date 11-17-04

Authorization to Construct by: William O. Johnson date 10/10/03 Existing System Inspection by: _____ date _____

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