IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 13675 PIN# 4730493423 (412) / 4730494487 (412) DATE 11-17-05

OWNER OR CONTRACTOR Carl Starnes PHONE: Business 704-528-1919 Home

ADDRESS 199 Wallace Road Mooresville NC 28115

LOCATION State Park Rd - Meadow Glen - end of Culdesac

SUBDIVISION Meadow Glen BLOCK / SECTION LOT 111/112 LOT AREA SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 2-15-05
Pump Tank: 1000 Gallons; PT 283 Date 10-21-05
Pump Make: Goulds Model WE07124 Serial No. 506253955
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines 5 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 2550 gpm
Repair System Description: 2 pump
Maintenance Agreement Required: ☐ Yes ☐ No None

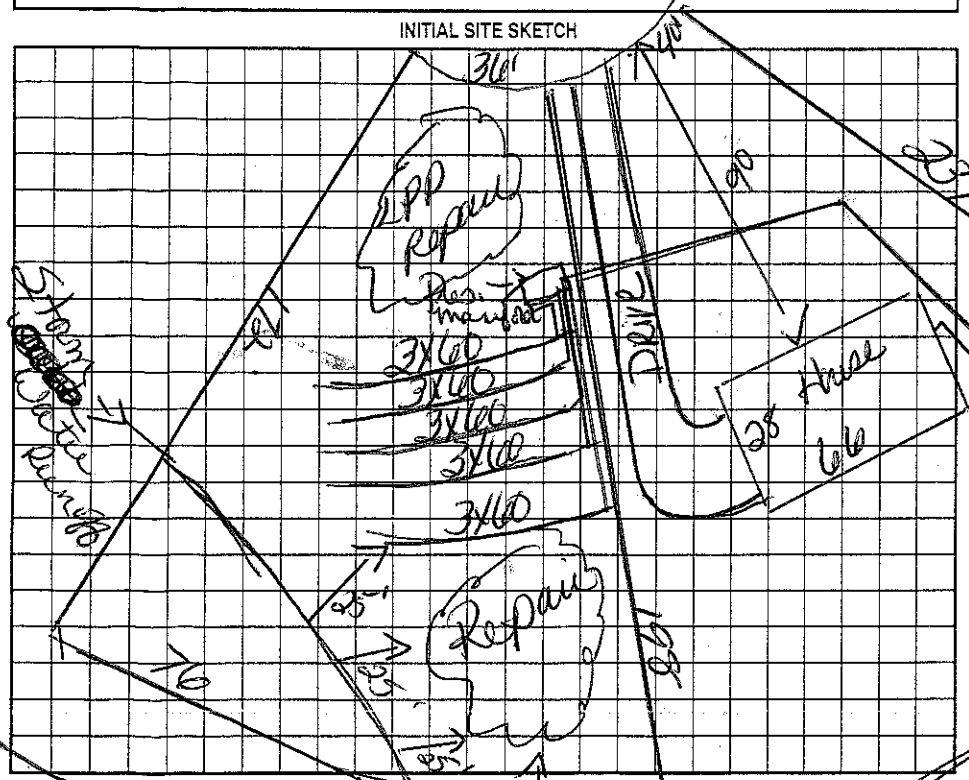
☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

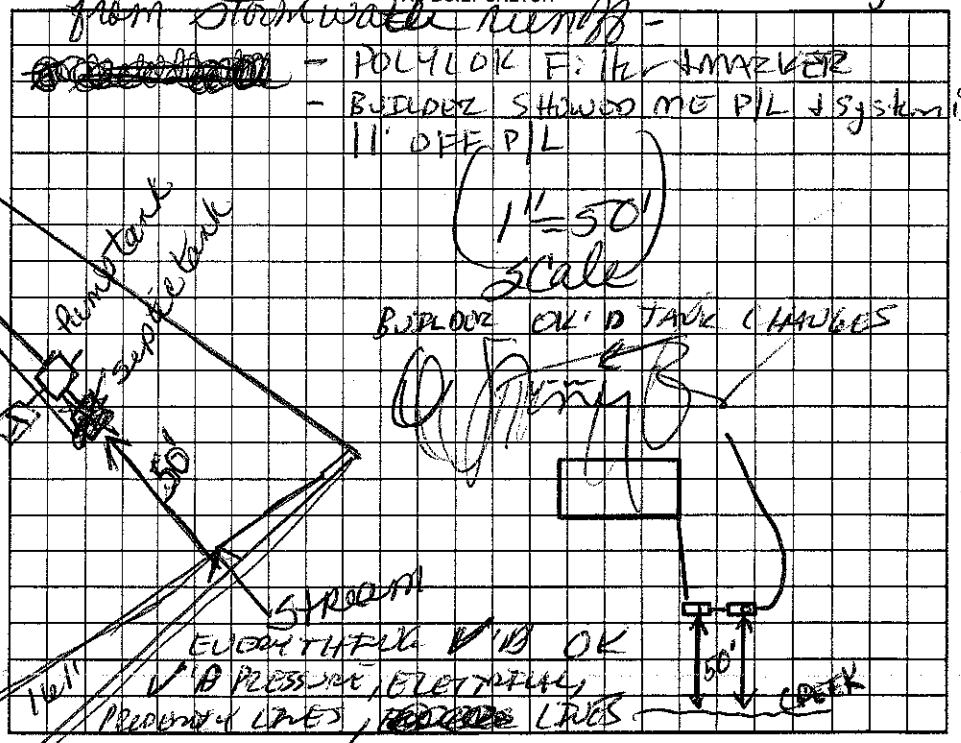
Comments:/Conditions: * see attached easement paperwork
Maintain all setbacks -
Install on Contour

Comments:/Conditions: * Tanks must be maintained 50' away from stream
* Drain lines maintained 25' away from stormwater runoff -
- POLYLOK FILTER HARVESTER
- BUILDER SHOWCASE MF P/L SYSTEMS 11' OFF P/L

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: Jessica Hilton date 11-17-05 Installed by: JST ENTERPRISES

Improvement Permit by: Kelly Cox date 11-17-05 Operation Permit by: [signature] date 12-13-05

Authorization to Construct by: Kelly Cox date 11-17-05 Existing System Inspection by: date

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