IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101820 PIN# 4756-67-4679 DATE 8-23-01

OWNER OR CONTRACTOR HORNE BLDG INC PHONE: Business 704-902-0399 Home 704-878-2224

ADDRESS BAYMOUNT LANE, STATESVILLE, NC 28625

LOCATION OLD MOCKSVILLE HWY (L) JANE SOWERS (R) BAYMOUNT, CORNER OF BAYMOUNT & APPLE

SUBDIVISION BAYMOUNT BLOCK / SECTION ____ LOT 122 LOT AREA 1.693 AC SITE CLASS. PS DESIGN FLOW PS L.T.A.R. .13

Septic Tank: 1000 Gallons: STB 1007 Date 12-27-01
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI
System Description: CONV GRAV
Repair System Description: GRAV / PUMP 254 GPD
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 2
[ ] Business No. Employees ____
[ ] Other ____

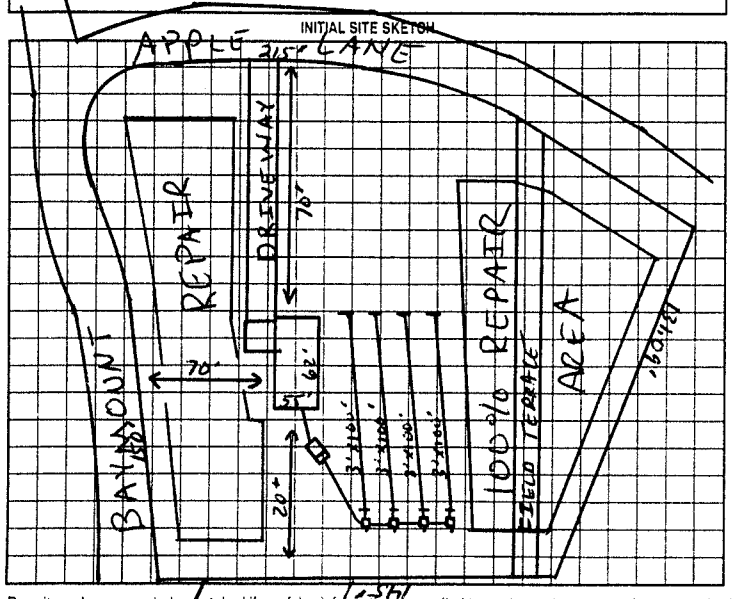
[X] Slab [ ] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [ ] Individual [X] Public [ ] Community

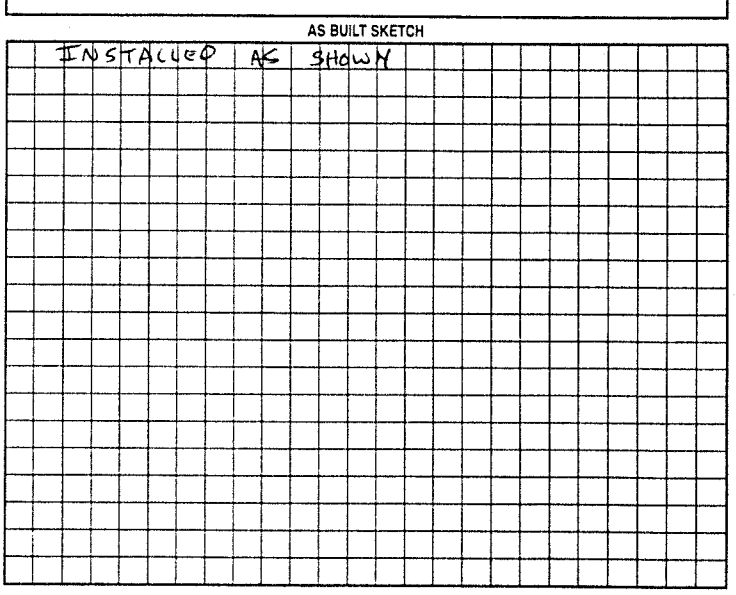
Comments/Conditions: (1) KNOCK DOWN FIED TERRACE & DIRT HUMP SO CONTOURS IN BACK YARD IS EVEN & UNIFORM (2) INSTALL LINES ON CONTOUR (3) MAINTAIN SETBACKS

Comments/Conditions: (4) KEEP H2O LINE 10' FROM SYSTEM POLYLOK FILTER & MARKER

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: [signature] date 8-23-01 Installed by: TODD BENTLY

Improvement Permit by: Jim Cook ES date 8-23-01 Operation Permit by: Jim Cook date 2-15-02

Authorization to Construct by: Jim Cook ES date 8-23-01 Existing System Inspection by: ____ date ____

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