IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 105558 PIN# 4756-98-~~7432~~ 6378

OWNER OR CONTRACTOR GL WILSON BLDG CO. PHONE: Business 704-872-2411 JACK CR EASY Home DATE 05-08-02

ADDRESS 190 WILSON PARK RD STATESVILLE NC 28625

LOCATION 64E, (L) OLD MOCKSVILLE, (R) RIGHT ACROSS FROM CHESTNUT GROVE RD, FOLLOW DRIVE TO END

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 62.25 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 2-20-03

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'

No Lines 4X100' 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: SAME

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home No. Bedrooms 3

[ ] Mobile Home No. Bathrooms 3

[ ] Business No. Employees _____

[ ] Other _____

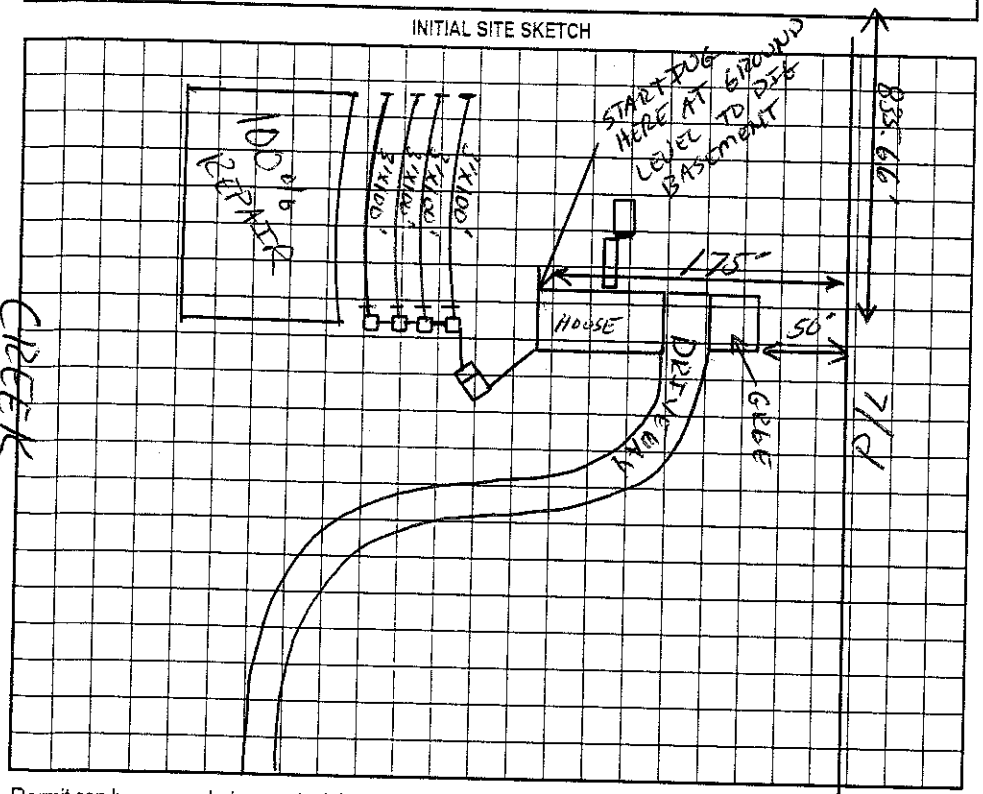
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

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

Comments/Conditions: (1) HOUSE SITE FLAGGED OUT (2) MAINTAIN SETBACKS & INSTALL LINES ON CONTOURS (3) CALL PRIOR TO INSTALLATION FOR FLAGOUT.

Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "PolyLok" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO 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: Jack B. Creasy date 05-09-02

Improvement Permit by: [signature] RS date 05-08-02

Authorization to Construct by: [signature] RS date 05-08-02

Installed by: JAMES HUDLER

Operation Permit by: STEVE HENDRICK date 5-14-03

Existing System Inspection by: _____ date _____

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