IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(C) PERMIT# 120069 PIN# 4757-38-8432 DATE 5-3-04

OWNER OR CONTRACTOR MOOREFIELD BUILDERS, INC PHONE: Business 704-880-6620 Home 704-873-7885

ADDRESS 1516 MOCKSVILLE HWY STATESVILLE, NC 28625

LOCATION US 21 NORTH, TL MAPLE CREEK DR, TL FOUR WINDS, TO END ON RIGHT

SUBDIVISION MAPLE CREEK BLOCK / SECTION I LOT 23 LOT AREA 1.518 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.40 GPD/FT2

Septic Tank: 1000 Gallons; STB 1012 Date 10-9-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

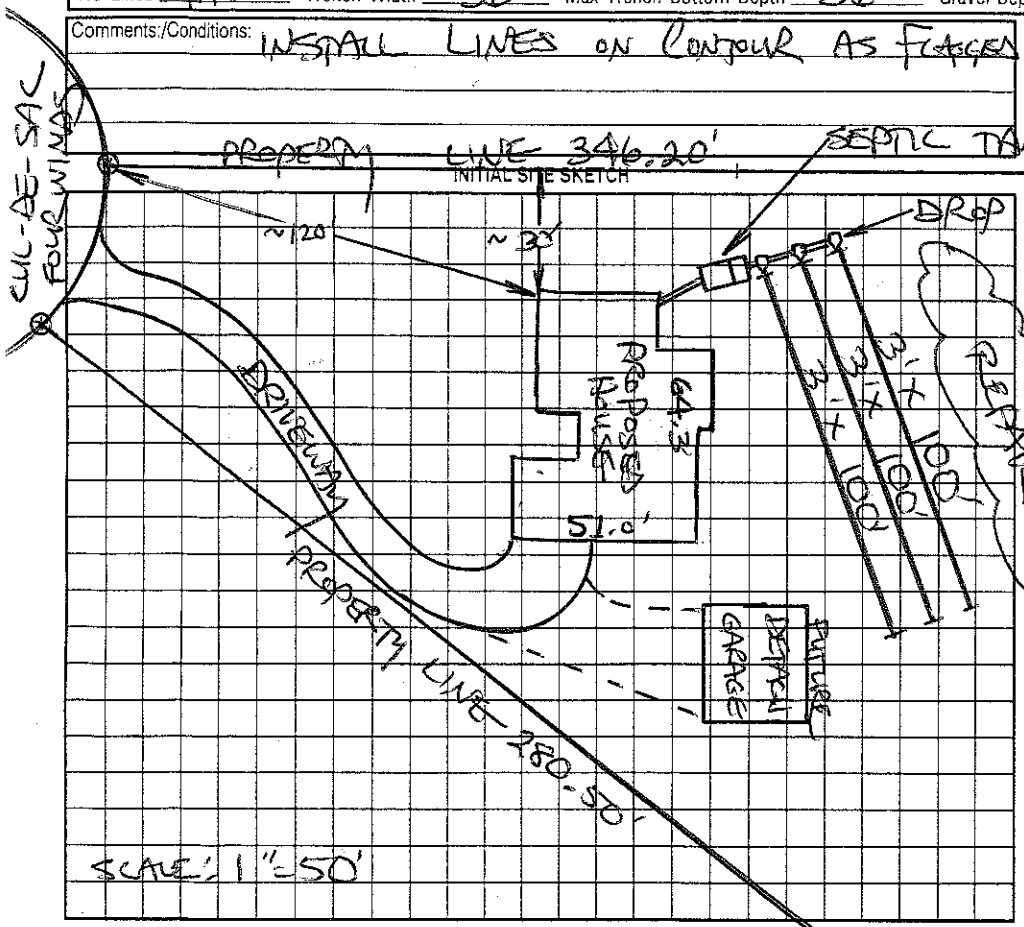
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

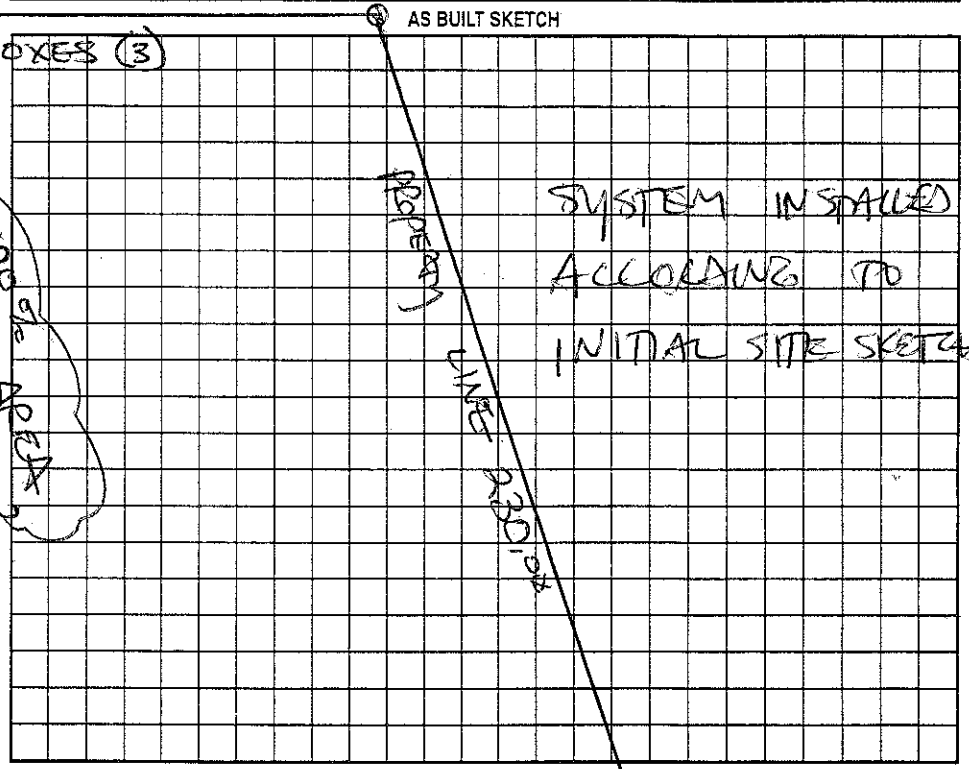
Comments:/Conditions: INSTALL LINES ON CONTOUR AS FLAGGED

Comments:/Conditions: SEPTIC TANK WITH MARKER & RISERS INSTALLED USING "TUFTITE" FILTER

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: Matt Moorefield date 5-3-04 Installed by: PIEDMONT BACKHOE

Improvement Permit by: STEVE HEDRICK date 5-3-04 Operation Permit by: STEVE HEDRICK date 12-17-04

Authorization to Construct by: STEVE HEDRICK date 5-3-04 Existing System Inspection by: ____ date ____

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