4-04-130

IRE[illegible] COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-C[illegible]3281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYST[illegible]INSPECTION

PERMIT# 105705 PIN# 4671 02 3587.2 4671-02-3678 DATE 4/24/02

OWNER OR CONTRACTOR KEM RIVERA PHONE: Business 528-3320 Home

ADDRESS 144 RIVERGRASS CIRCLE MOORESVILLE NC 28117

LOCATION 21 N - TR OSWALT AMITY - [illegible] TR WEATHERS CREEK - TR TRAE CT. - 2ND ON LT

SUBDIVISION RYANWOODS BLOCK / SECTION LOT 2 LOT AREA SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .3690/FT²

Septic Tank: 1000 Gallons; STB 794 Date 4/16/02
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

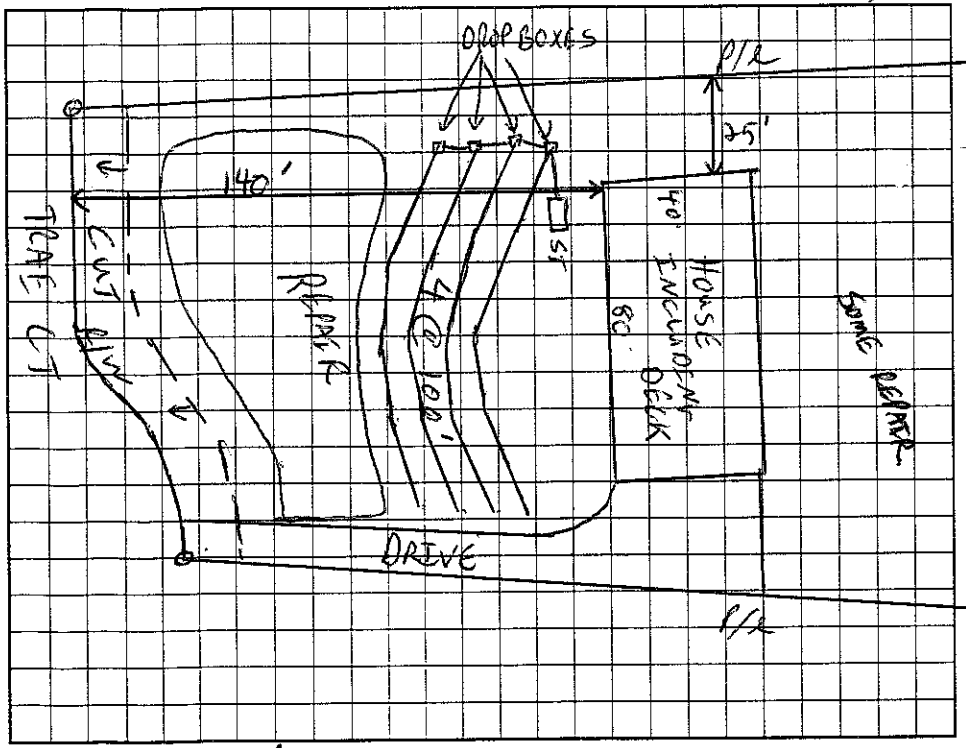
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

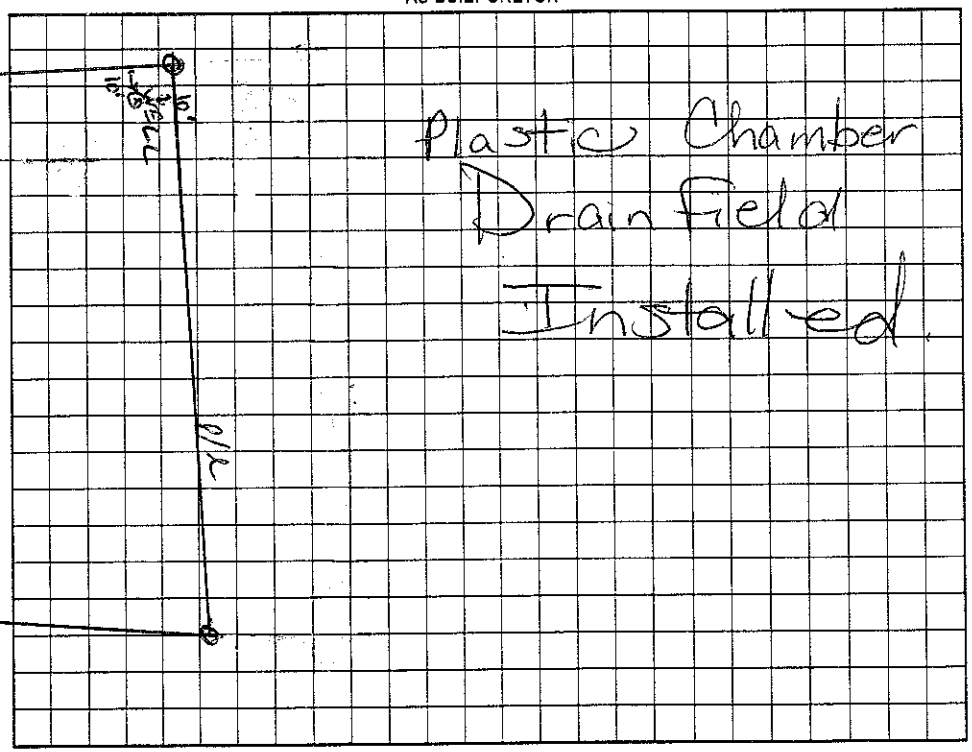
Comments/Conditions: 1) SYSTEM AND REPAIR TO BE 100' FROM WELL

Comments/Conditions: Lines 1, 2 & 3 checked by G.M. 4th line checked by M.D.

INITIAL SITE SKETCH 1"=50'



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 4/26/02 Installed by: Marty Tucker RS

Improvement Permit by: [signature] RS date 4/24/02 Operation Permit by: Maria H.H. Dobson RS date 5/31/2002

Authorization to Construct by: [signature] RS date 4/24/02 Existing System Inspection by: date

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