IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 088702 PIN# 4761-65-1580 PT 4761-43-5848 DATE 10/17/01

OWNER OR CONTRACTOR Deer Valley LLC / Lander Homes PHONE: Business 662-8436 Home

ADDRESS 255 Rolling Hills Dr Mooresville NC 28117

LOCATION 115 N, TR Oswalt Amity; TR Brawley; TR Deer Valley on Lt.

SUBDIVISION Deer Valley BLOCK / SECTION 3 LOT 28 LOT AREA 0.91AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 1012 Date 9/15/01

Pump Tank: 1000 Gallons; PT 17 Date 9/17/01

Pump Make: HYDRO Model SK50A1 Serial No. 9/01

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 —

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Pump 25% Reduction

Repair System Description: LP Panel

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 2 No. Employees

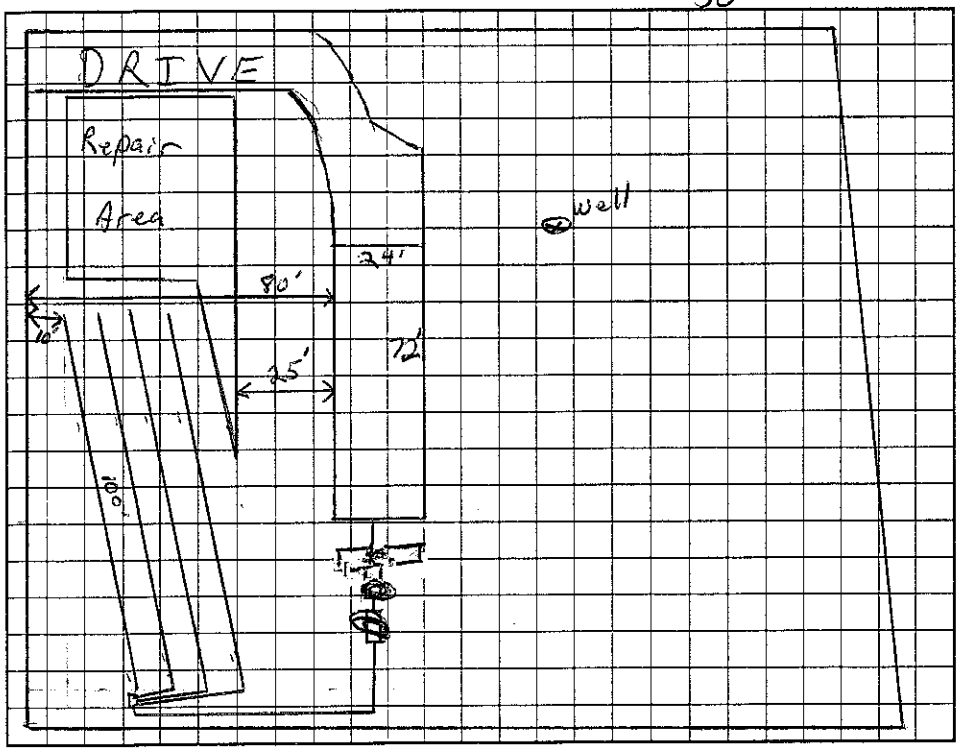
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Keep Well 50' minimum from septic and repair area.

Comments:/Conditions: INFILTRATOR INSTALLED ALARM MOUNTED.

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: Paul Agnello Agent date 12-13-01 Installed by: A-1

Improvement Permit by: RS date 10/17/01 Operation Permit by: RS date 12/31/01

Authorization to Construct by: RSE date 10/17/01 Existing System Inspection by: date

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