2:00

# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 106216 PIN# 4761651580.59 DATE 8/1/02

OWNER OR CONTRACTOR DEER VALLEY LLC / FLEETWOOD PHONE: Business 664-4080 Home

ADDRESS 258 ROLLING HILLS DR MOORESVILLE NC 28117

LOCATION OSWALT ANDY - TR BEAWLEY RD - ON LT

SUBDIVISION DEER VALLEY BLOCK / SECTION 4 LOT 59 LOT AREA 1.14AC SITE CLASS PS DESIGN FLOW 360 GPD L.T.A.R. 1.05, 1.36 W/ R2

Septic Tank: 1000 Gallons; STB 1012 Date 10-7-04

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No. 300 Auto

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

No Lines ~~4 @ 85' Auto~~ 3 @ 100' Trench Width 36" Max Trench Bottom Depth @ 24" Gravel Depth N/A

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

System Description: GRAVITY INNOVATIVE

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 (4 Auth) No. Bathrooms 4 No. Employees

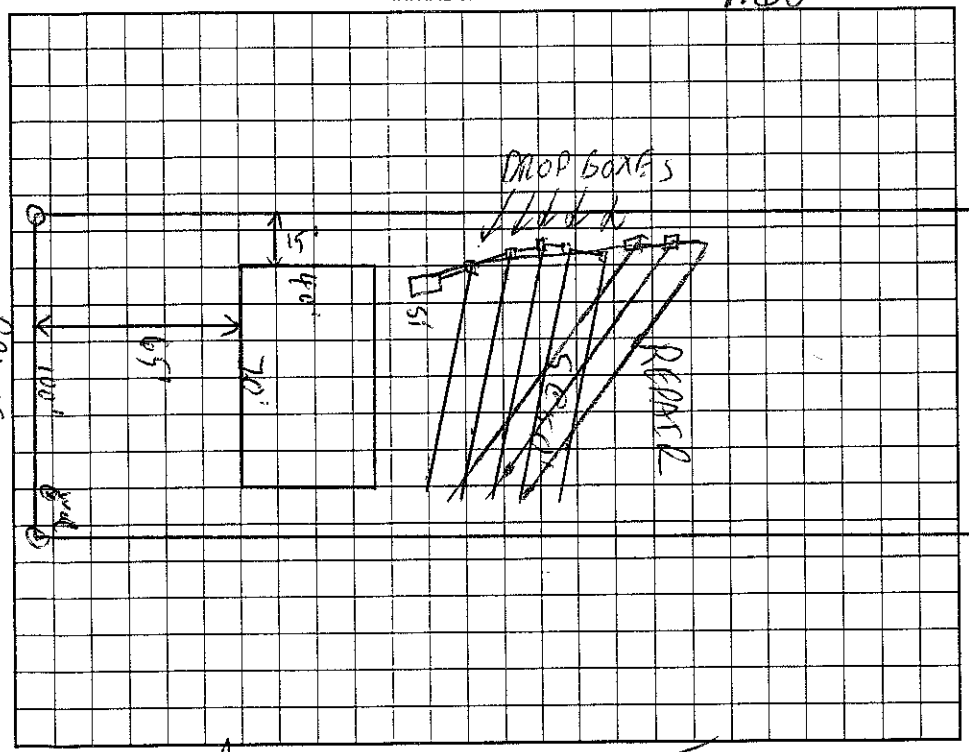
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments/Conditions: 1) DRIVE ON EITHER SIDE
2) .25 LTAR FOR REPAIR

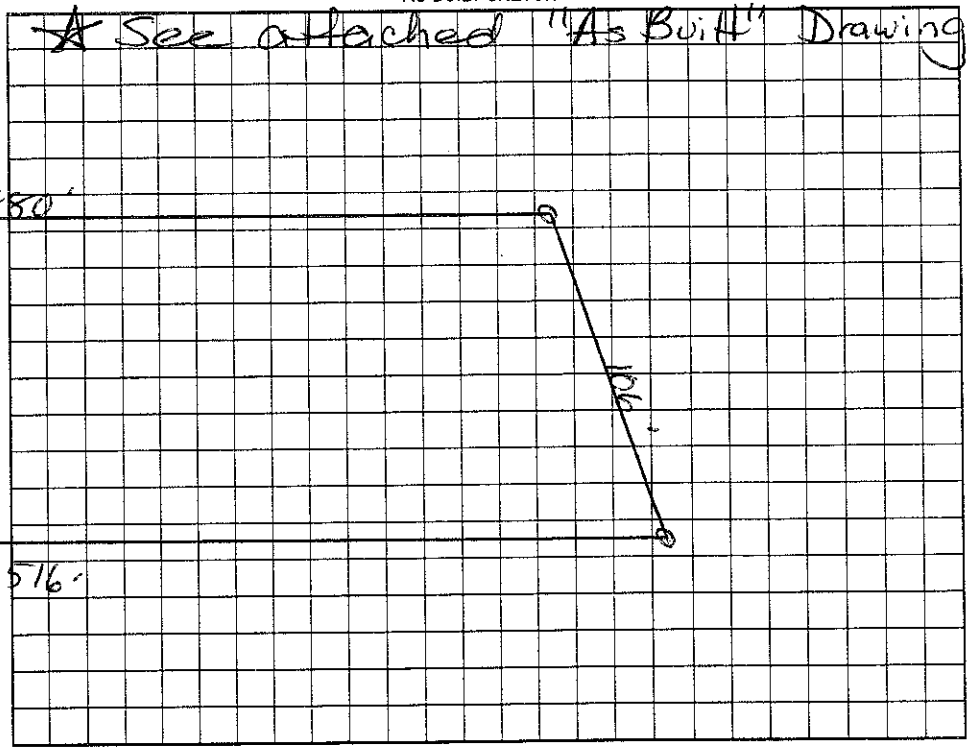
Comments/Conditions: Installed Plastic Chambers in 3-100' lines

INITIAL SITE SKETCH 1:60




AS BUILT SKETCH

★ See attached "As Built" Drawing




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: date

Improvement Permit by: date 8/1/02

Authorization to Construct by: Wesley Sparks RS. date 6/3/05

Installed by: Craig Thompson RS. date 6/17/05

Operation Permit by: date

Existing System Inspection by: date

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