IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112443 PIN# 4762-42-0725 DATE 05/27/03

OWNER OR CONTRACTOR LUV HOMES PHONE: Business 704-528-0848 Home 704-528-9246

ADDRESS 1036 CHARLOTTE HWY TROUTMAN, NC 28116

LOCATION HWY 70 EAST, (R) BETHESDA RD., (L) HICKORY NUT DR., 2nd LOT ON LEFT,

SUBDIVISION LAUREL GROVE BLOCK / SECTION ____ LOT 2 LOT AREA 1.01 ACRES SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1,000 Gallons; STB 312 Date 03/14/03
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ to 1,440 Linear Feet 480
No Lines 5 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: 25% REDUC., GRAVITY
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

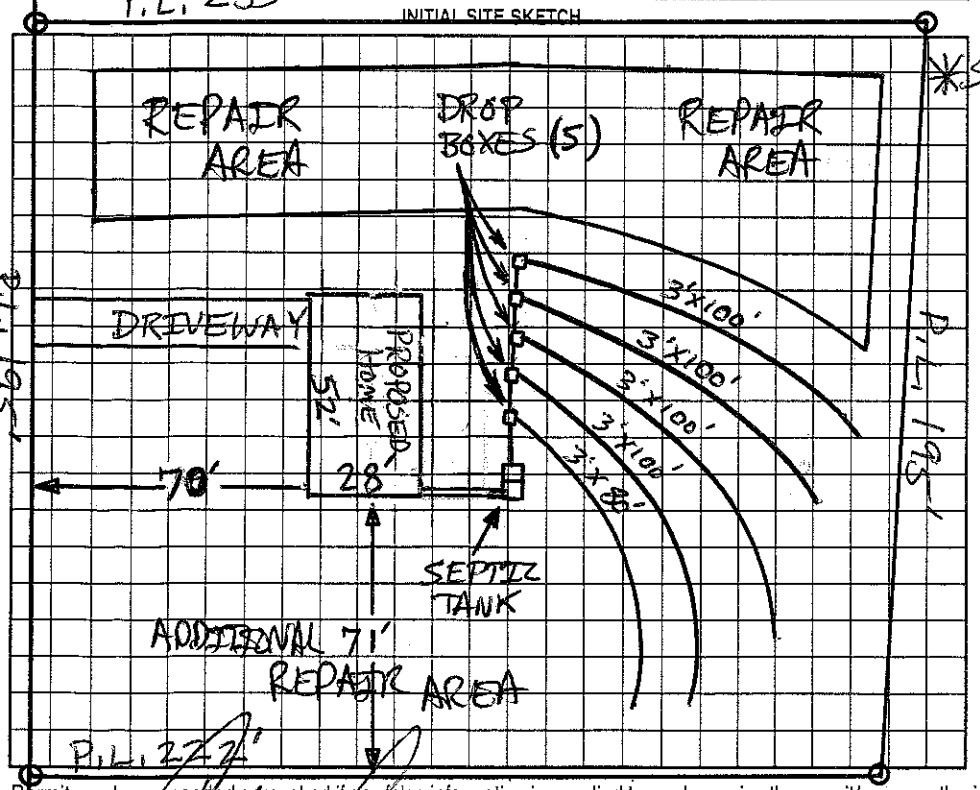
Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions:

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- SEPTIC TANK INSTALLED USING ZABEL FILTER + TANK MARKER.

INITIAL SITE SKETCH



AS BUILT SKETCH

* SYSTEM INSTALLED AS SHOWN IN 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: ____ date 06/02/03 Installed by: MARTY TUCKER 6-10-03

Improvement Permit by: Patrick Mitchell date 05/27/03 Operation Permit by: Patrick Mitchell date 06/11/03

Authorization to Construct by: Patrick Mitchell date 05/27/03 Existing System Inspection by: ____ date ____

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