IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5231

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

PERMIT# 099888 PIN# 4762 71 3810 DATE 6/14/00

OWNER OR CONTRACTOR Darrell Hill PHONE: Business 660-6436 Home

ADDRESS 420 Tomwall St. Mooresville, NC. 28115

LOCATION Shumville Rd. TL Bromley Rd. (L) on 6.0. Amity TR Hickory Nut Rd. (R) Bungaway on (L) Nosarka.

SUBDIVISION LAUREL GROVE BLOCK / SECTION LOT 30 LOT AREA 9.19 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 10-2-00
Pump Tank: 1000 Gallons; PT 302 Date 10-1-00
Pump Make: Hydromatic Model SK60M1 Serial No 143075
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3@133'x3' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

[X] New System [ ] Repair System Type: I (II) III IV V VI
System Description: AM-CONVENTIONAL
Repair System Description: SAME
Maintenance Agreement Required: [ ] Yes [X] No

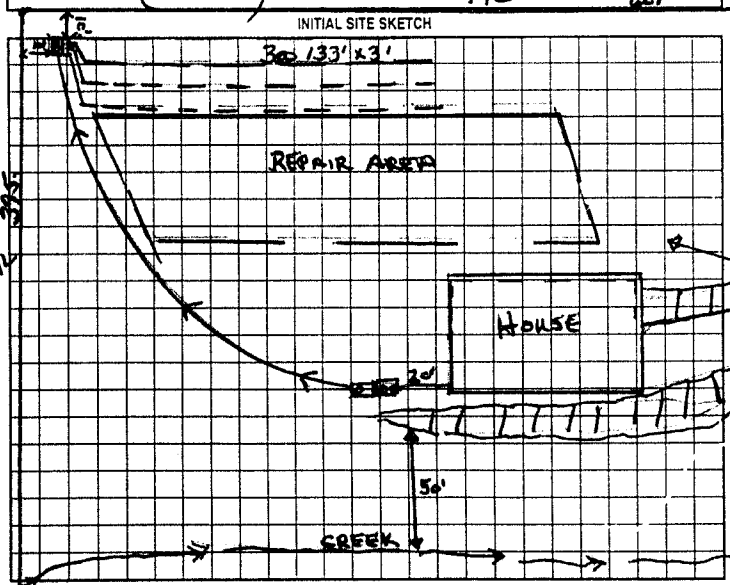
[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 2
[ ] Business No. Employees
[ ] Other
[ ] Slab [ ] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

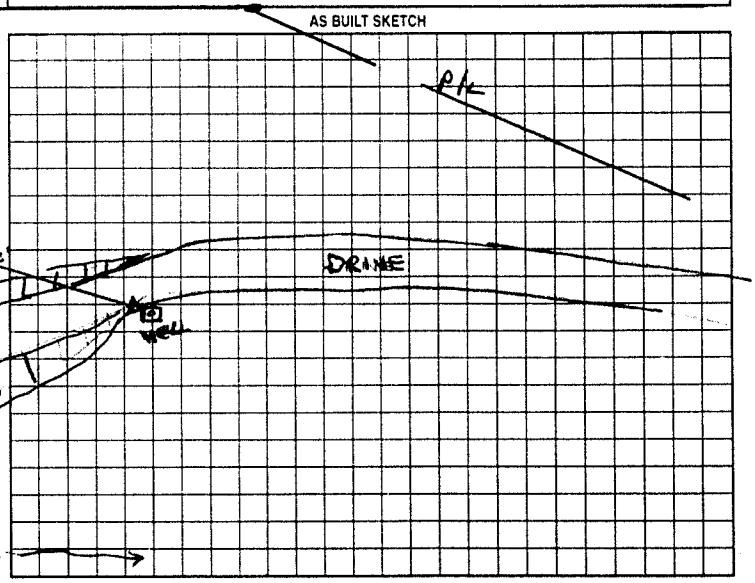
Comments/Conditions: (1"=40') P/L 601

Comments/Conditions: Poly lok filter. Tanks, Lines, Pressure OK - 12/1/00 GM

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: * Shirley Hill date 6/15/00

Improvement Permit by: Wesley Sparks RS. date 6/14/00

Authorization to Construct by: Wesley Sparks RS. date 6/14/00

Installed by: Orbison

Operation Permit by: [illegible] RST date 12/27/00

Existing System Inspection by: date

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