IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 130366 PIN# 4765-57-8831 9729 DATE 8-23-05

OWNER OR CONTRACTOR MICHAEL G. MORRIS PHONE: Business Home 704-878-2455

ADDRESS 108 ELLIS RD Statesville NC 28625

LOCATION 64 EAST (L) RIVERHILL (R) AT BOX # 330, BEHIND KATHLEEN ELLIS HOUSE BOX # 352

SUBDIVISION N/A BLOCK / SECTION N/A LOT N/A LOT AREA .50 AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .13

Septic Tank: 1000 Gallons; STB 825 Date 9-15-05
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet EQ=1600' Linear Feet 269'
No Lines 6x45' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: GRAY 50% REDUCT
Repair System Description: LP 50% REDUCT
Maintenance Agreement Required: [ ] Yes [X] No

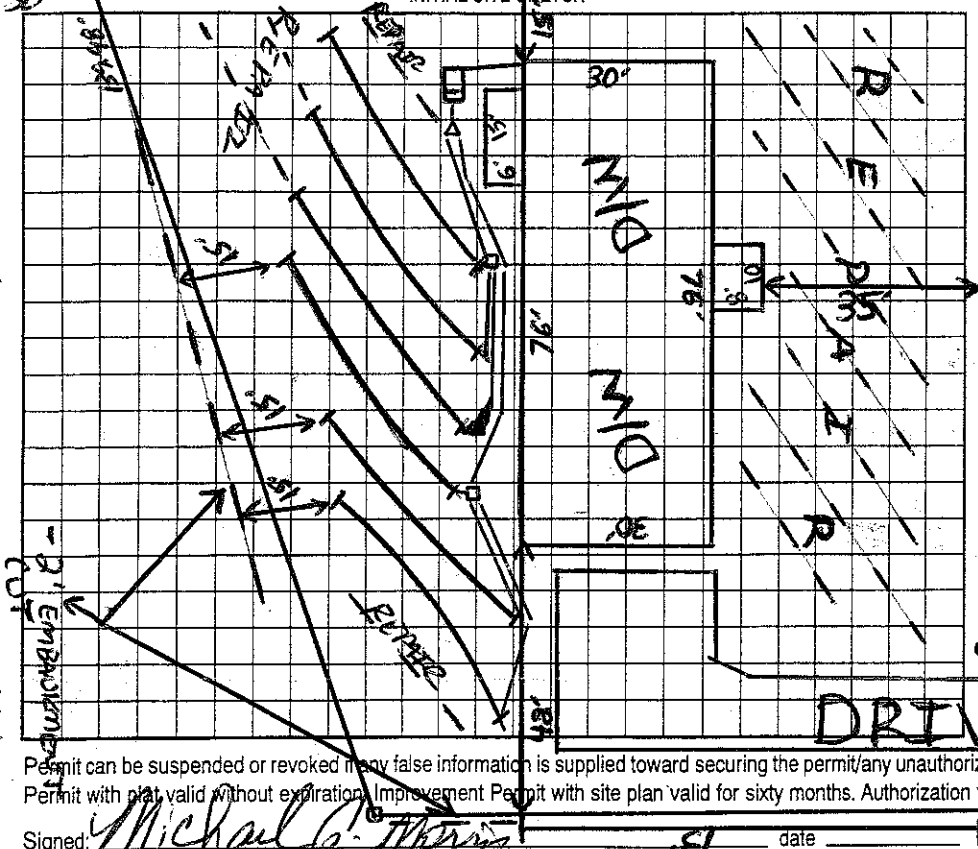
[ ] House/Mod. Home No. Bedrooms 4
[X] Mobile Home No. Bathrooms 2
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

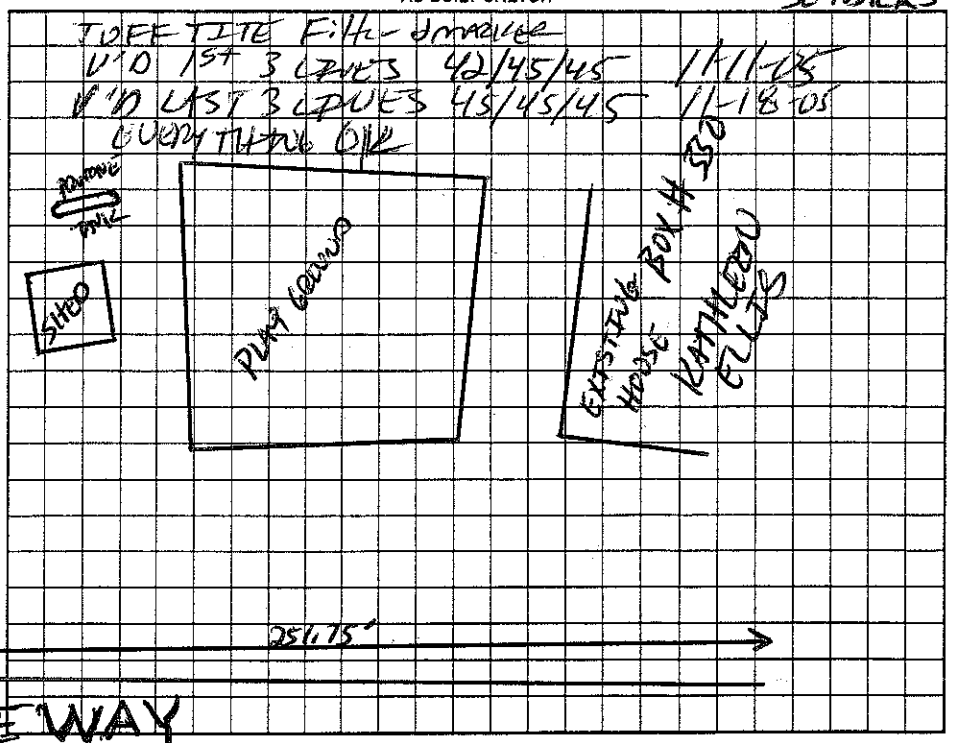
Comments:/Conditions: (1) INSTALL 6 LINES, 45 LONG, 24" WIDE DITCH, 1 FLOW DIVIDER TEE, 2 FLOW EQUALIZATION DEVICES & KEEP LINES 15' OFF 2' EMBANKMENT CUT. 73'

Comments:/Conditions: (2) DO NOT CUT HOUSE PAD OR PERMIT WILL BE VOID (3) LOT IS EXTREMELY TIGHT. ALL OF INITIAL SYSTEM IS FLAGGED (4) MAKE SURE ALL Utility LINES stay OUT OF INITIAL & REPAIR AREAS (5) MAINT. PER SETBACKS

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: Michael G. Morris date 8-23-05 Installed by: BOBBY ISAACKADE

Improvement Permit by: date 8-23-05 Operation Permit by: date 11-18-05

Authorization to Construct by: date 8-23-05 Existing System Inspection by: date

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