IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 88952 PIN# 4766-75-3785 DATE 12-16-02

OWNER OR CONTRACTOR JOHN CLORE / BF CUSTOM HOMES PHONE: Business BF = 704-902-1348 Home 704-528-3657

ADDRESS 280 MARIETTA LANE MOORESVILLE NC 28117 SEVEN SPRINGS

LOCATION 64 EAST, (L) RIVERHILL (L) CHESTNUT (L) 2ND ~~CORRECTED~~ LOOP FIRST LOT ON LEFT LOT # 54

SUBDIVISION 7 SPRINGS BLOCK / SECTION 1 LOT 54 LOT AREA 1.2 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .13

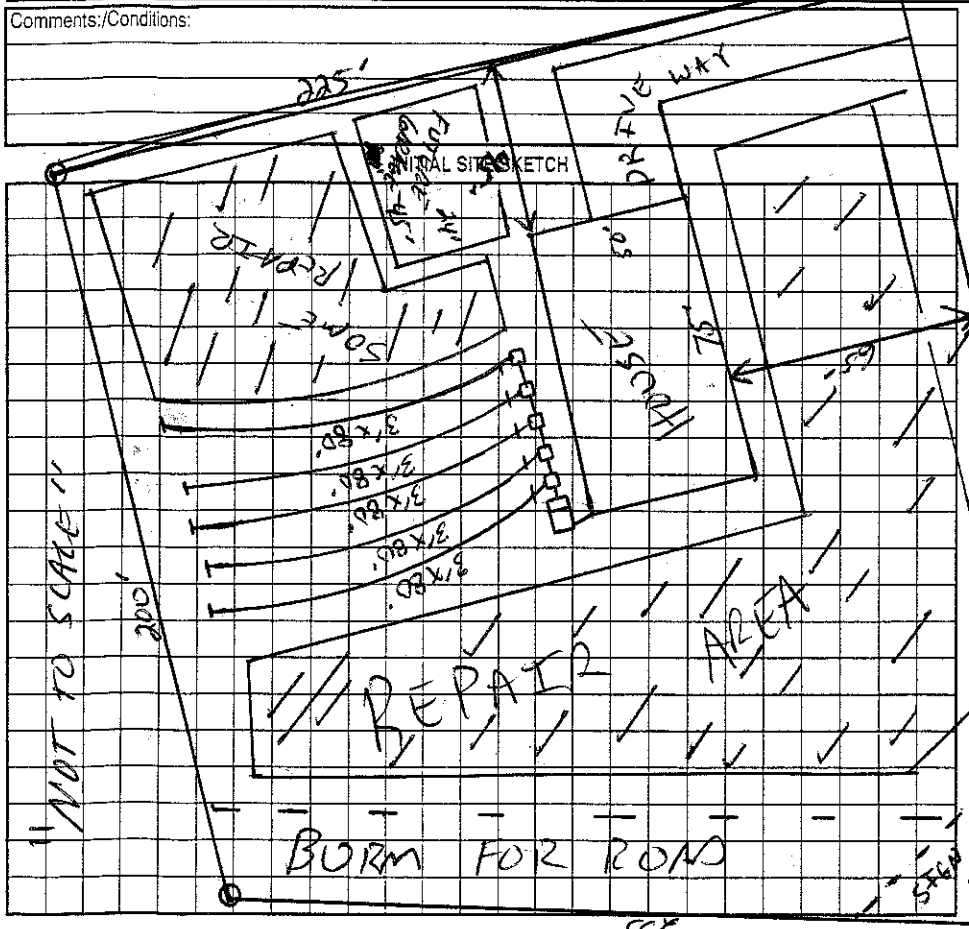
Septic Tank: 1000 Gallons; STB 1012 Date 10/16/02
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 5x80' Trench Width 36" Max Trench Bottom Depth 36"

[X] New System [ ] Repair System Type: I (II) III. IV. V. VI
System Description: CONV GRAV
Repair System Description: LP 25% REDUCTION
Maintenance Agreement Required: [ ] Yes [X] No
Gravel Depth 12"

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

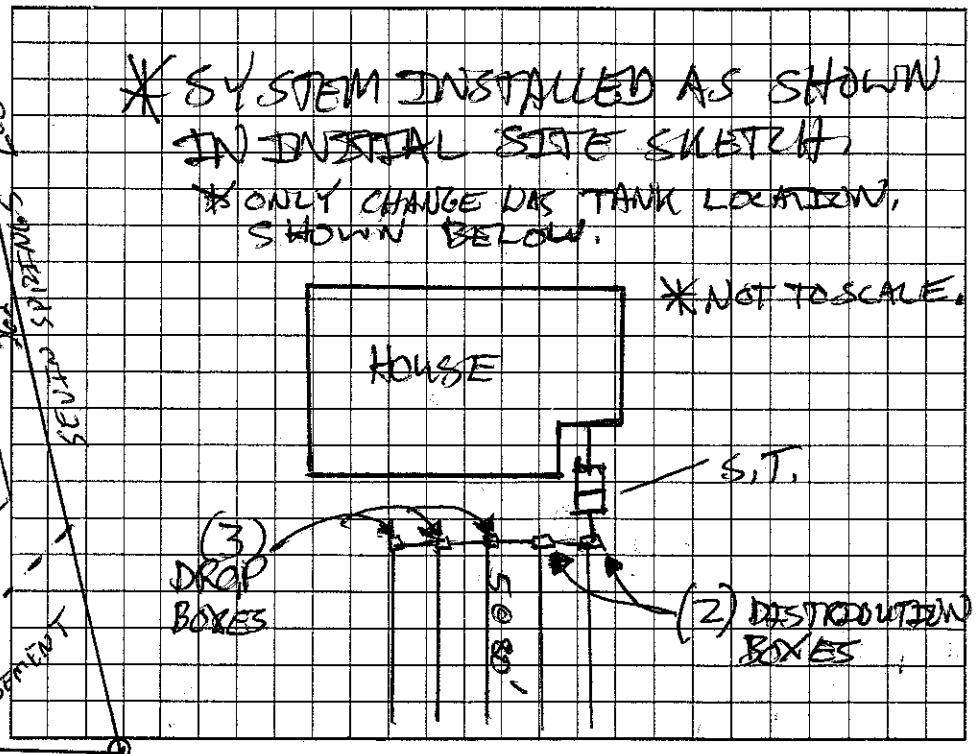
Water Supply: [ ] Individual [X] Public [ ] Community

Comments:/Conditions:



Comments:/Conditions: (1) STUB OUT HIGH TO ACHIEVE GRAVITY FLOW (2) MAINTAIN SETBACKS (3) INSTALL LINES ON CONTOURS
* TANK INSTALLED USING TUFF-TIGHT FILTER

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: ____ date 12-16-02 Installed by: DAVID YOUNTZ 5-9-03

Improvement Permit by: ____ date 12-16-02 Operation Permit by: ____ date 05/09/03

Authorization to Construct by: ____ date 12-16-02 Existing System Inspection by: ____ date ____

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