IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 088009 PIN# 4770 40 514332 DATE 3/16/00

OWNER OR CONTRACTOR Mark Howard PHONE: Business 336-707-5143 Home

ADDRESS PO Box 19365 Greensboro, NC. 27419

LOCATION 115N TR Mazeppa Rd. TL Triplett Rd, TR Confederate Rd, TR Lynette Drive, 2ND lot on (R)

SUBDIVISION TWIN BROOKS BLOCK / SECTION LOT 18 LOT AREA ~.88 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 786 Date 2/28/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 * Linear Feet 300 *
No Lines ~~4@75x3'~~ Trench Width 36" Max Trench Bottom Depth 36" ~~Gravel Depth~~ SAND

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: * HDS OR CHAM. PLASTIC
Repair System Description: PRESSURE → Type 3
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

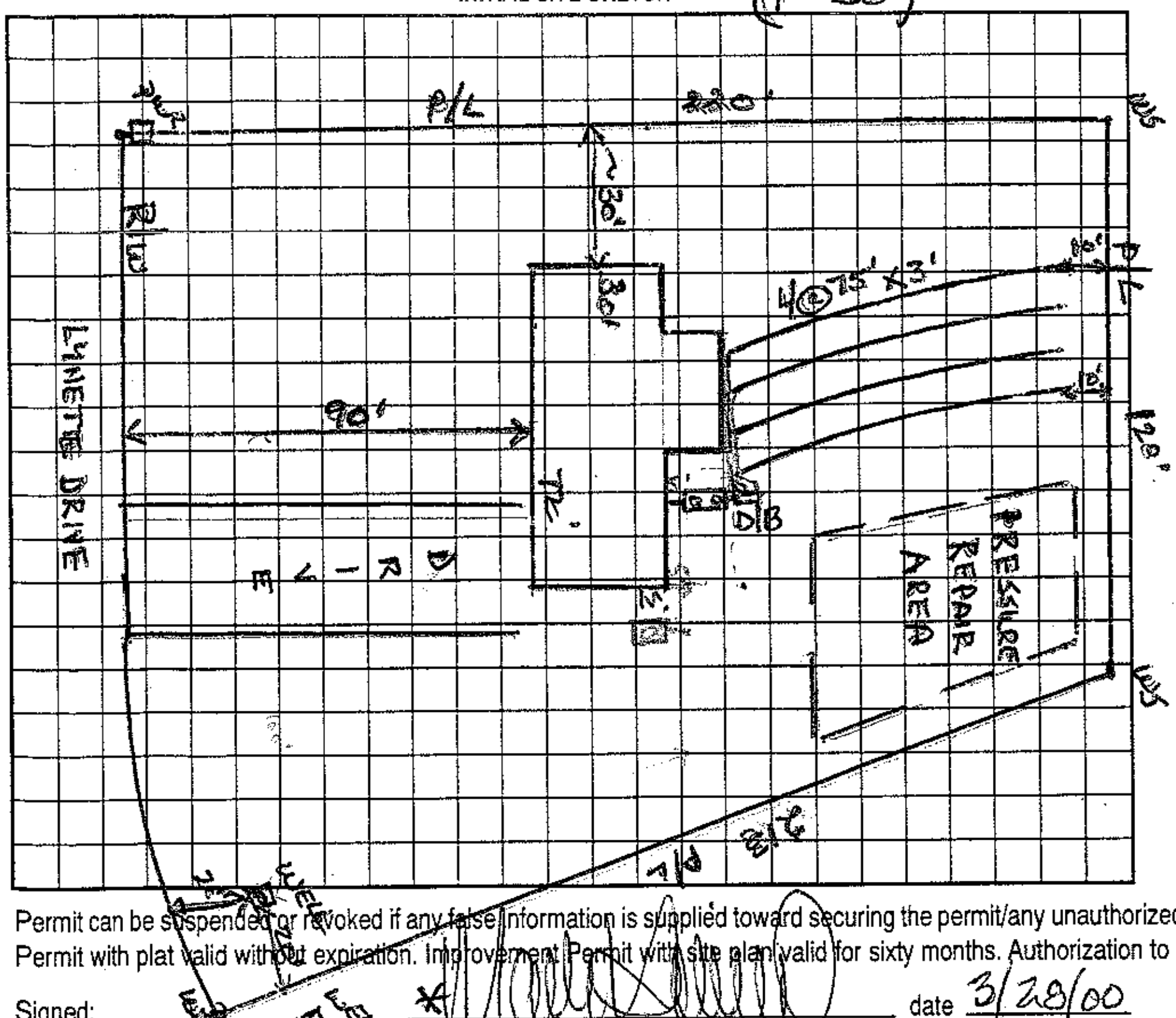
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:
[5@ 60'x3'] 6/28/00

Comments:/Conditions:
5@ 60'x3' Ch Plastic installed

INITIAL SITE SKETCH (1"=50')



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: * [signature] date 3/28/00 Installed by: B+M

Improvement Permit by: Wesley Sparks RS. date 3/16/00 Operation Permit by: Wesley Sparks RS. date 6/29/00

Authorization to Construct by: Wesley Sparks RS date 3/16/00 Existing System Inspection by: date

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