3:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 83264 PIN# 4773882657 DATE 8-10-99

OWNER OR CONTRACTOR Acorn Building Co. PHONE: Business 924-4916 Home

ADDRESS PO BOX 5671 Statesville, N.C.

LOCATION 70E TR Knox Fm TR Sage Tl Thyme on left.

SUBDIVISION Crestfield BLOCK / SECTION LOT 19 LOT AREA .52acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 6/17/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields Square Feet Linear Feet
No Lines 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I. II. III IV. V. VI
System Description: Gravity 25% Redu.
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☐ No

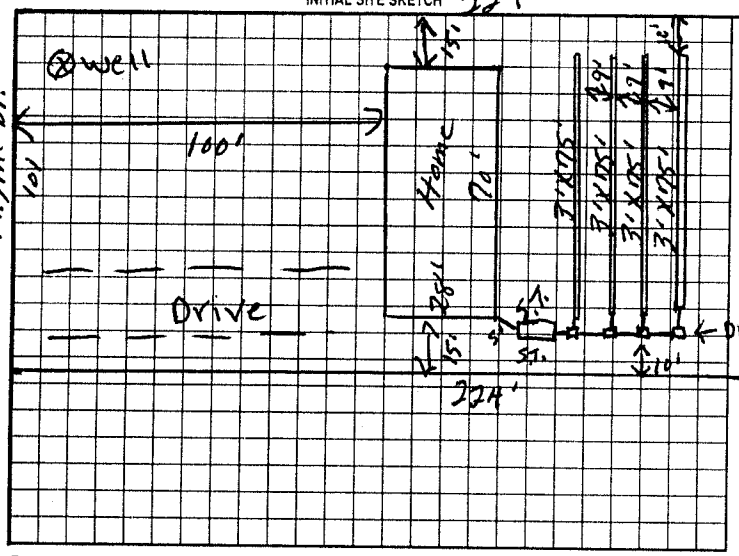
☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

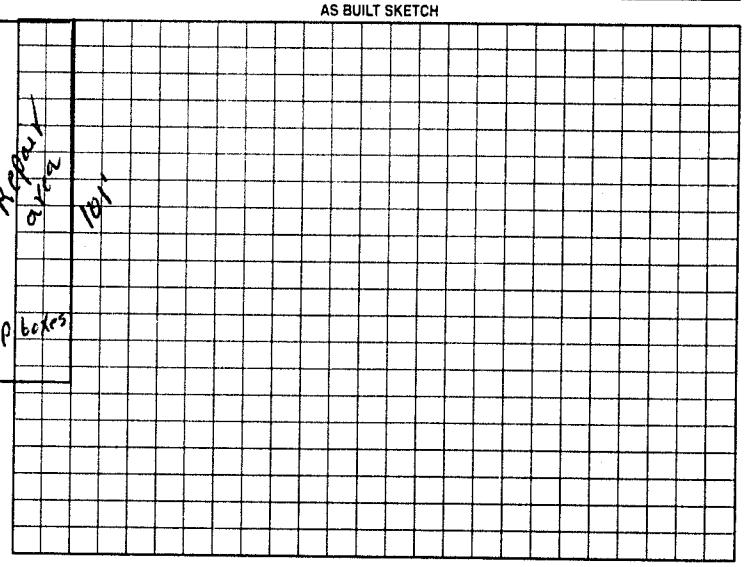
Comments/Conditions:

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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 White date 8/12/99 Installed by: Craig Thompson Grading

Improvement Permit by: J. C. moore date 8-10-99 Operation Permit by: [signature] REI date 8/17/00

Authorization to Construct by: J. C. moore date 8-10-99 Existing System Inspection by: date

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