IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 11/11/00

PERMIT# 92726 PIN# 4774 6435 73 PHONE: Business 704/483-5202 Home

OWNER OR CONTRACTOR Richard Morse

ADDRESS 145 Old Wellhouse Rd Statesville NC 28677

LOCATION 64E, R Barry Oak, R Mills Garden on RT-1.6 MILES

SUBDIVISION Mills Garden BLOCK / SECTION — LOT 5 LOT AREA 1.94 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 160 Date 9-20-00

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model — Serial No. —

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3@34' 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: Gravity Conv.

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes X No

☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

X House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees —

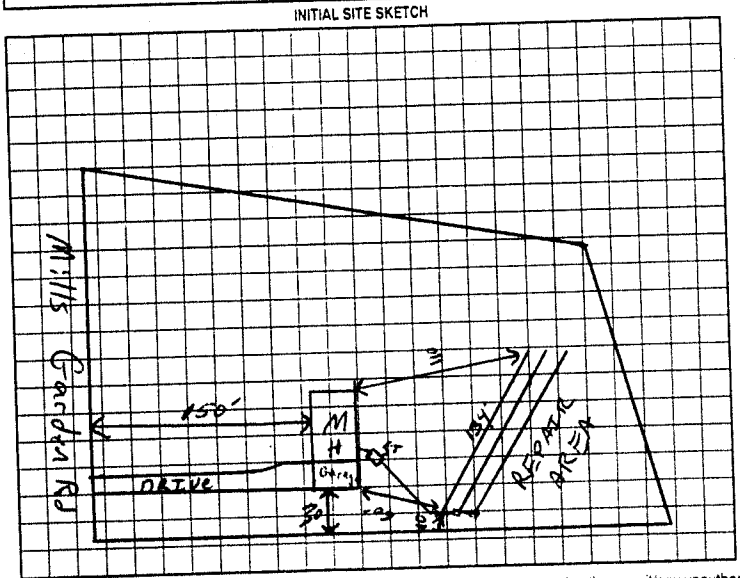
☐ Other —

Water Supply: ☐ Individual X Public ☐ Community

Comments/Conditions:

Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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 11/2/00 Installed by: HARVEY LEATHERMAN

Improvement Permit by: [signature] RSI date 11/11/00 Operation Permit by: STEVE HERRICK date 11-17-00

Authorization to Construct by: [signature] RSI date 11/11/00 Existing System Inspection by: — date —

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