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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 135647 PIN# 3774-78-4212 DATE 05/25/06

OWNER OR APPLICANT WILLIAM "GLEN" WALLACE PHONE: Business 336-414-8182 Home 704-872-3526

ADDRESS 820 PHILLIPS LN, STATESVILLE, NC

LOCATION I-40 W, (R) SHARON SCHOOL RD, (L) STEWART ROCK DR., ~1 MILE ON LEFT.

SUBDIVISION RIVERWALK BLOCK / SECTION 9 LOT 11 LOT AREA 5.0 ACRES SITE CLASS. PS DESIGN FLOW 600 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,500 Gallons; STB RST 10-14-15 Date 4-11-06

Pump Tank: 1,500 Gallons; PT RST-PT 46-15 Date 3-20-06

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ to 2,000 Linear Feet 500

No Lines 5@100' Trench Width 36" Max Trench Bottom Depth 36"

[X] New System [ ] Repair [ ] Expansion System Type: I II (III) IV V VI

System Description: PUMP, 25% REDUCTION

Repair System Description: PUMP, 50% REDUCTION

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other

No. Bedrooms 5 No. Persons ____ No. Employees ____

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

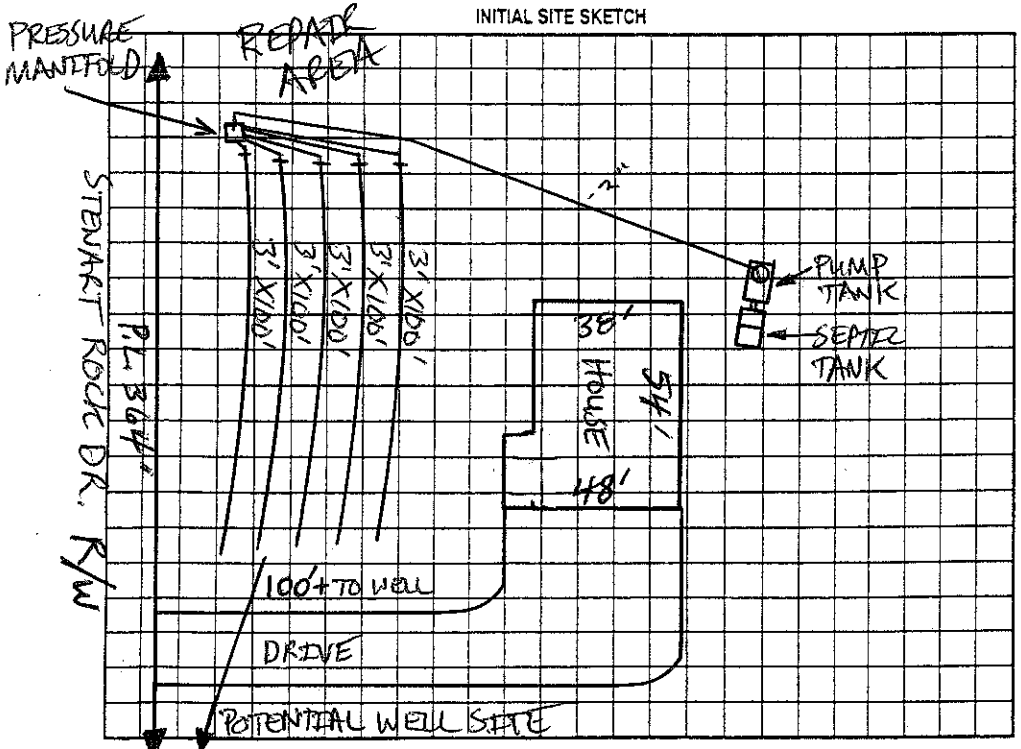
Gravel Depth N/A [ ] Gravity [X] Pressure [ ] Slab [ ] Crawl Space [ ] Basement w/plumbing [X] Basement wo/plumbing

Comments/Conditions: (1) ONCE DRAIN LINE AREA IS CLEARED, CALL HEALTH DEPT. TO HAVE LINES FLAGGED OUT. (2) SEE ATTACHED PUMP + PRESSURE MANIFOLD SHEETS.

Comments/Conditions: Tuff-tite - T-Baffle EF-6

Electrical passed 2-22-07 (KH)

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: William Glen Wallace date 5-26-06 Installed by: Doil-1 Madison

Improvement Permit by: STEVE HEDRICK date 5-26-06 Operation Permit by: D. Wagoner, R.S. date 22 Feb. 07

Authorization to Construct by: STEVE HEDRICK date 5-26-06 Existing System Inspection by: _____ date _____

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