IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 149643 PIN# 3784-90-0313 DATE 2 May 08

OWNER OR APPLICANT Southern Land and Development, Inc. PHONE: Business 704-876-1080 Home

ADDRESS 125 Green Field Dr. West Statesville, N.C.

LOCATION Sharon School Rd. Turn Falling Creek Dr. Lot on left.

SUBDIVISION Sharon Trace BLOCK / SECTION 2 LOT 39 LOT AREA 0.5 Ac. SITE CLASS. PS DESIGN FLOW 360gd L.T.A.R. 0.3 gd/ft²

Septic Tank: 1000 Gallons: STB 312 Date 7-14-08

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet ≥ 1200 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Persons No. Employees

Water Supply: ☐ Individual ☑ Public ☐ Community

☑ Gravity ☐ Pressure ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

Follow contour

* Keep system out of Depression

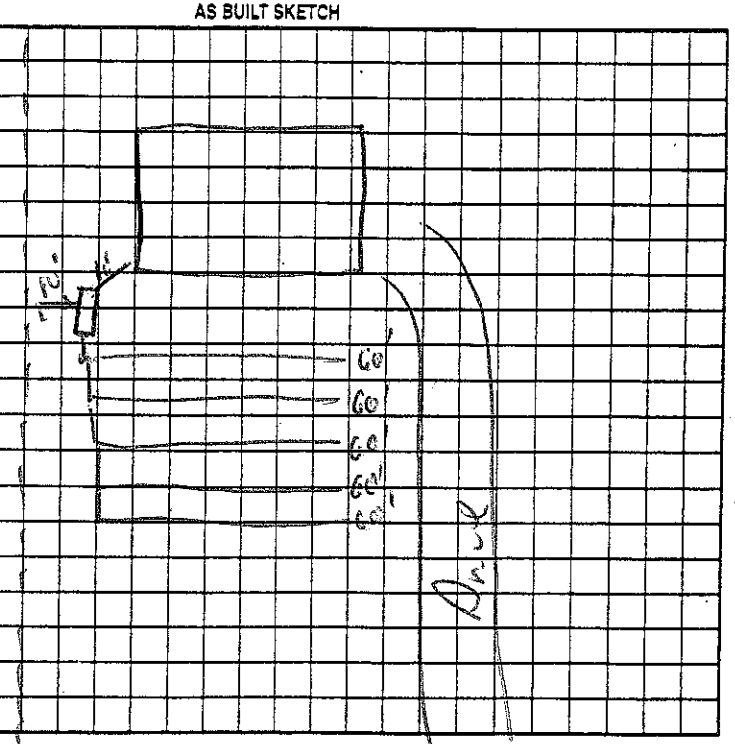
Comments:/Conditions:

Fill — w/stabilized

INITIAL SITE SKETCH

Please See Attached layout

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

Improvement Permit by: R.S. date 2 May 08

Authorization to Construct by: R.S. date 2 May 08

Installed by: Kay Grading

Operation Permit by: R.S. date 24 Sept. 08

Existing System Inspection by: date

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