IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 7911 PIN# 3794611170 DATE 3 25 99

OWNER OR CONTRACTOR Silverwave Prop PHONE: Business 704 532 6527 Home

ADDRESS 5551 Monroe Rd Charlotte NC

LOCATION Island Ford @ Gable Rd on Left ½ mile

SUBDIVISION Featherstone BLOCK / SECTION LOT # 1 LOT AREA .69 SITE CLASS P5 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 4.14.99
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 2002/1940 Linear Feet 300/360 25%
No Lines 3-4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 5 And 6"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: 25% Reduction
Repair System Description: 25% Reduction Pump
Maintenance Agreement Required: ☐ Yes ☒ No

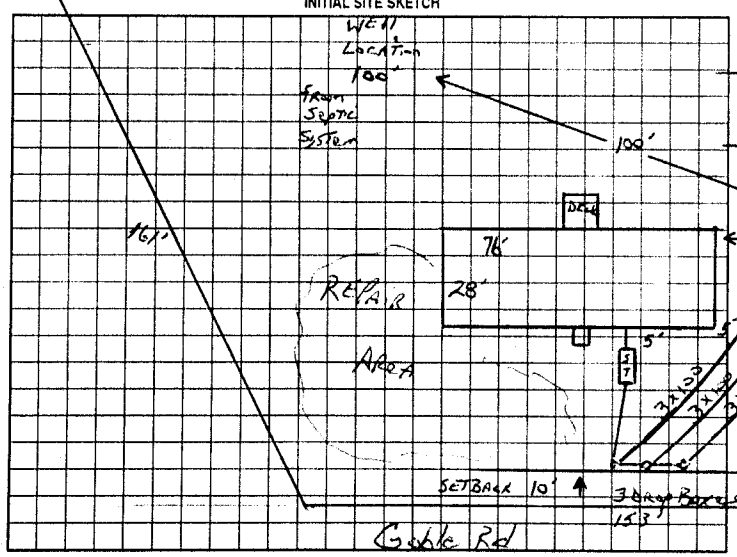
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

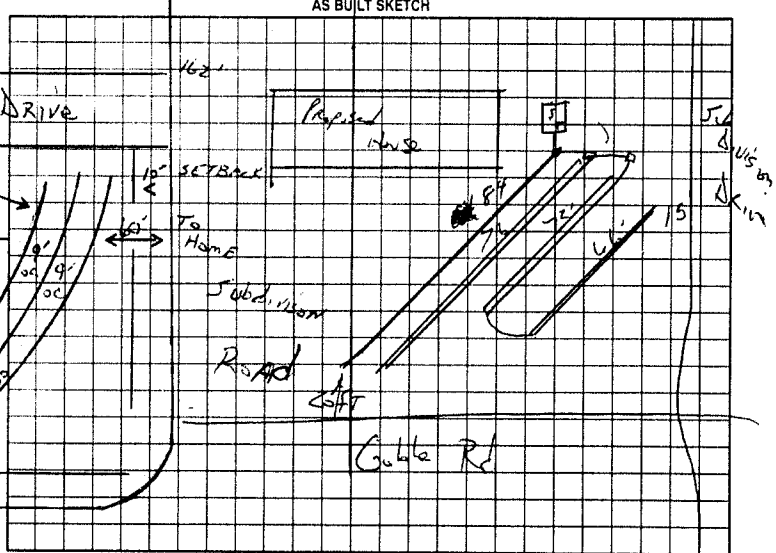
Comments/Conditions: May have To install 2 100ft & 2 50ft Lines if not possible To do 3 100's ~~Contamb~~ More Home. Sixty Feet Subdivision Road Side 244'

Comments/Conditions 50 chambers or 30 HDS sections

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: James T Barkley date 3-26-99

Improvement Permit by: J. C. Potter date 3 26 99

Authorization to Construct by: J. C. Potter date 3 26 99

Installed by: Al Brackhan

Operation Permit by: J. C. Potter date June 2, 99

Existing System Inspection by: date

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