IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093636 PIN# 3794611170 DATE 2/15/01

OWNER OR CONTRACTOR Silverwave Properties PHONE: Business (704)532-6625 Home —

ADDRESS 5551 Monroe Road Charlotte N.C. 28212

LOCATION I-40W, (R) old Mtn Rd, (L) Ishue Ford Rd, (L) Gobble, (L) Moorestone, (R) on Arlington lots on left

SUBDIVISION Feather Stone BLOCK / SECTION 3 LOT 39 LOT AREA 1.14 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 7-14-0

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No. Lines 5 @ 80ft Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

[X] New System [ ] Repair System Type: [I] II, IV, V, VI

System Description: Gravity, Conventional

Repair System Description: Pump, Conventional

Maintenance Agreement Required: [ ] Yes [X] No

[ ] House/Mod. Home No. Bedrooms 3

[X] Mobile Home No. Bathrooms 2

[ ] Business No. Employees _____

[ ] Other _____

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

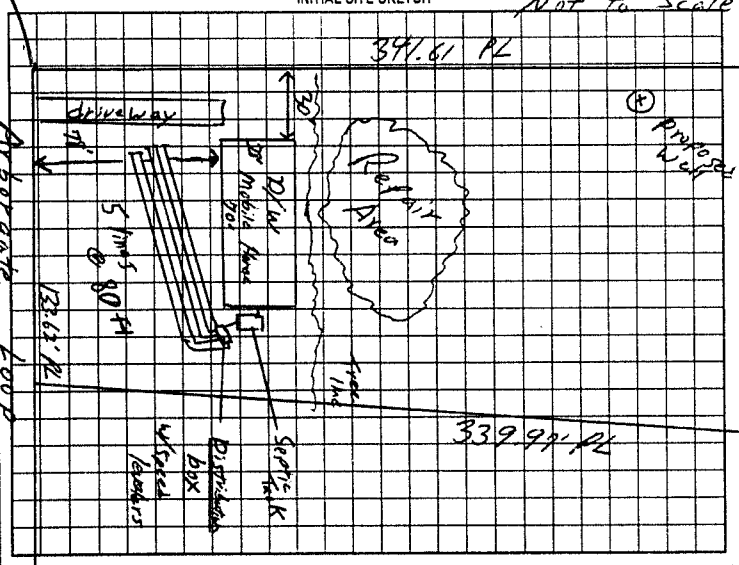
Water Supply: [X] Individual [ ] Public [ ] Community

Comments/Conditions: (1) Do not install when wet (2) Keep well 100ft From Initial System + Repair Area (3) Install liner on Contour (4) Use distribution box w/ 4 speed levelers

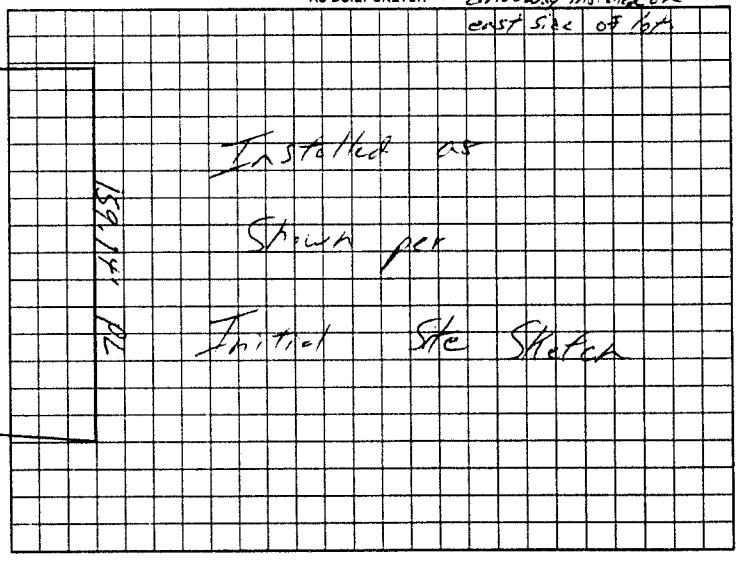
Comments/Conditions:

- Septic Tank marker Installed
- pump & filter Installed

INITIAL SITE SKETCH Not to Scale



AS BUILT SKETCH – driveway installed on east side of lot



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: Shane Beluch date 2/23/01

Improvement Permit by: William O. Johnson date 2/15/01

Authorization to Construct by: William O. Johnson date 2/15/01

Installed by: A-1 Backhoe

Operation Permit by: William O. Johnson date 12/5/0

Existing System Inspection by: _____ date _____

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