IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 2500 Paid MOORESVILLE 704-664-5281

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

PERMIT# 105474 PIN# ~~4624 27 5905~~ 4624-27-2759 DATE 6/21/04

OWNER OR CONTRACTOR Lifestyle Custom Homes PHONE: Business 704-795-1733 Home

ADDRESS 65 McCurdy St, Concord, NC 28027

LOCATION 1100 TR 2ND Mansfield TL Buckton TR 2ND Dedham, 2ND lot on (L)

SUBDIVISION Point BLOCK / SECTION 9 LOT 974 LOT AREA 1.13AC SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 338 Date 11/9/04
Pump Tank: 1500 Gallons; PT 477 Date 10/29/04
Pump Make: GOULDS Model VEO5172 Serial No. J04L4350
Nitrification Field: No Fields 1 Square Feet 666/999 Linear Feet 333
No Lines 3@111' Trench Width 2-3' Max Trench Bottom Depth 3' Gravel Depth NA

[X] New System [ ] Repair System Type: I, II, III, (IV), V, VI
System Description: Pressure Dosed 16" APBRS
Repair System Description: Same Type
Maintenance Agreement Required: [X] Yes [ ] No

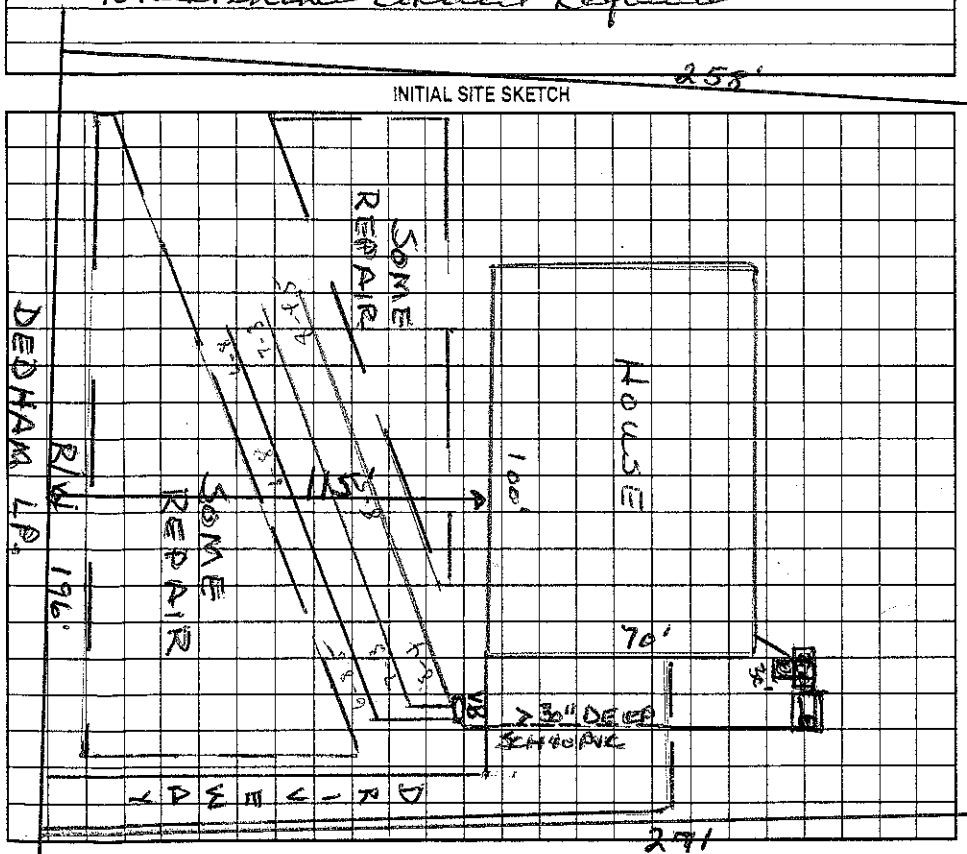
[X] House/Mod. Home No. Bedrooms 5
[ ] Mobile Home No. Bathrooms 4
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [ ] Individual [ ] Public [X] Community CL+T

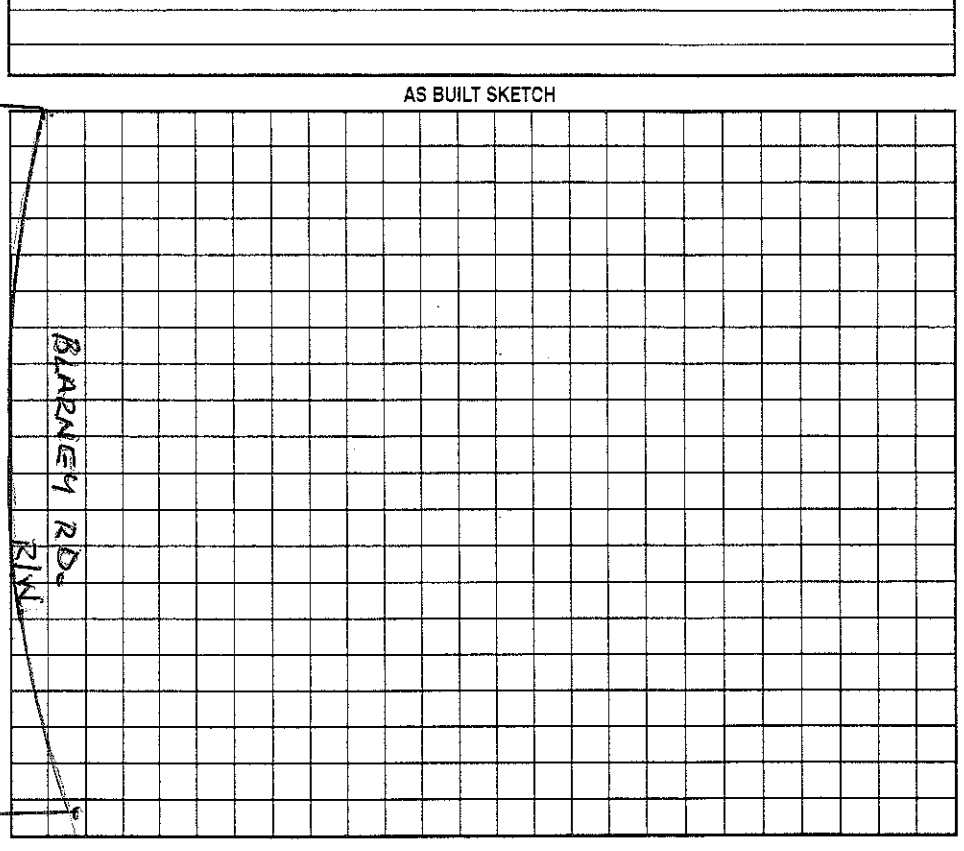
Comments:/Conditions: 2' on 8' Centers; 3' on 9' Centers
Maintenance Contract Required

Comments:/Conditions: 75 panels installed

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: _____ date 6/25/04 Installed by: Hallman Const

Improvement Permit by: Wesley Sparks RS. date 6/21/04 Operation Permit by: Wesley Sparks RS date 2/11/05

Authorization to Construct by: Wesley Sparks RS. date 6/21/04 Existing System Inspection by: _____ date _____

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