IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5231

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

PERMIT # 165823 PIN # 4625 29 7480 DATE March 29, 2011

OWNER or APPLICANT Stonebridge Luxury Homes / Larson PHONE: Business 704-658-1404 Home:

OWNER or APPLICANT ADDRESS PO Box 4297 Mooresville NC 28117

LOCATION / DIRECTIONS Brawley School Rd TR Bay Harbour TR Shipyard Pt. TL Cedar Bluff TL Tranquil Cove

SUBDIVISION The Harbour BLOCK / SECTION 6 LOT # 46/46A LOT AREA .69Ac DESIGN FLOW 480 gpd L.T.A.R. .3 gpd/ft²

Septic Tank 1500 # Gallons: STB 338 Date 7/12/11

Pump Tank 1000 Gallons: PT 27 Date 1/27/12

Pump Make Goulds Model 3/4HP WE0512H Serial #

Nitrification Field No Fields 1 No Lines 4 Linear Feet 400

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth NA ☐ GRAVITY ☒ PRESSURE

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

System Description: 25% Reduction Pump PM

Repair System Description: LPPPBPS

Maintenance Agreement Required ☐ YES ☒ NO

☒ Residence No. Bedrooms 4

☐ Business No. Persons

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions

* per plan specs
- Fill roadbed w/in 15' of septic line
* Note: Move tanks to side of House to accomodate Swimming pool.

INITIAL SITE SKETCH

See Plan from SqME

Approved by ECHD

Comments / Conditions

5/4/11 Reviewed Site plan & Floor plan in Compliance with original permit

AS BUILT SKETCH

Installed Quick 4, checked lines

2/29/2012 Checked tanks 3/2/12

3/5/2012 Checked Supply line (2 inch)

4/16/2012 Set 2ft Pressure, Checked electo alarm

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed*

Owner / Applicant Signature: [signature] Date 5-4-11

Improvement Permit by: [signature] Date 3-29-11

Authorization to Construct by: [signature] Date 5/4/11

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

Installed by: Steve Jordon RS

Operation Permit by: [signature] Date:

Existing System Inspected by: Date:

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) O