IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 23370 PIN# ~~Pt of ICAC~~ 4626307247 DATE 3/10/98

OWNER OR CONTRACTOR Jimmy Burbank PHONE: Business 365-9916 Home

ADDRESS 6525 Morrison Blvd. Charlotte, NC. 28211

LOCATION Windy Knoll Lane, 1100 TR Chuckwood TL Mossy Ridge TR Lake Spring TR Windy Knoll, 2nd on L

SUBDIVISION HARBOUR BLOCK / SECTION III LOT 42 LOT AREA >25,000 FT² SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 9/29/97

Pump Tank: 1000 Gallons; PT 27 Date 10/18/97

Pump Make: HYDROMATIC Model 50A1 Serial No. 9/97

Nitrification Field: No Fields 1 Square Feet *725 Linear Feet 308*

No Lines 5 Trench Width 2@3'/3@2' Max Trench Bottom Depth 36" Gravel Depth SAND

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

System Description: LP - 16" PPBS

Repair System Description: SAME

Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 3

[ ] Mobile Home No. Bathrooms 3

[ ] Business No. Employees

[ ] Other

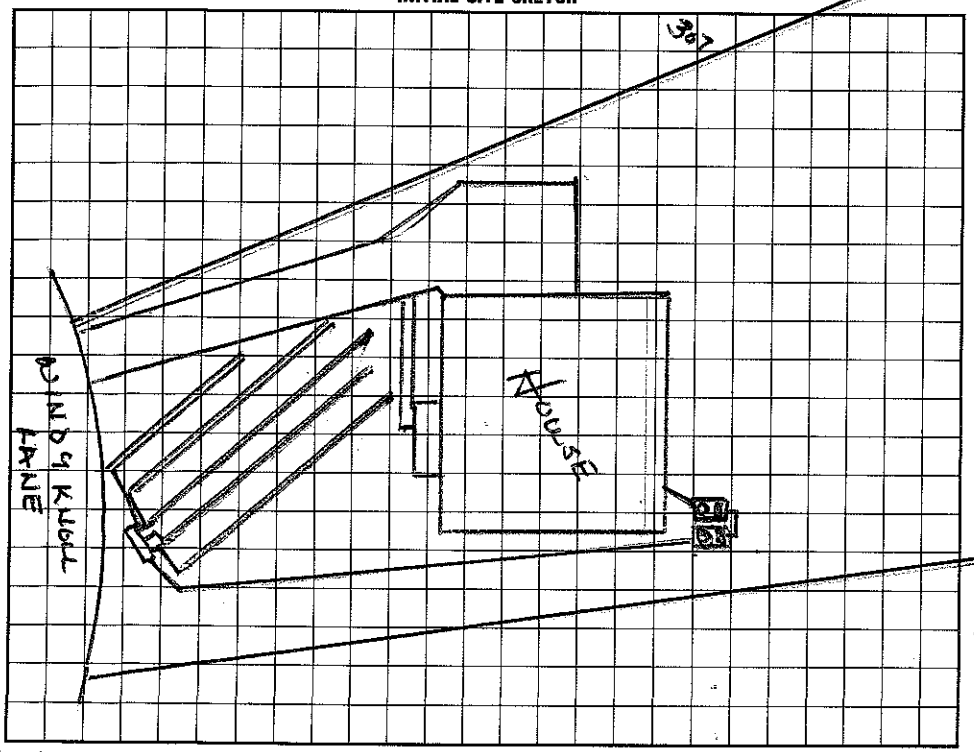
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

Comments:/Conditions: Addition to System

AS BUILT

~~INITIAL SITE SKETCH~~



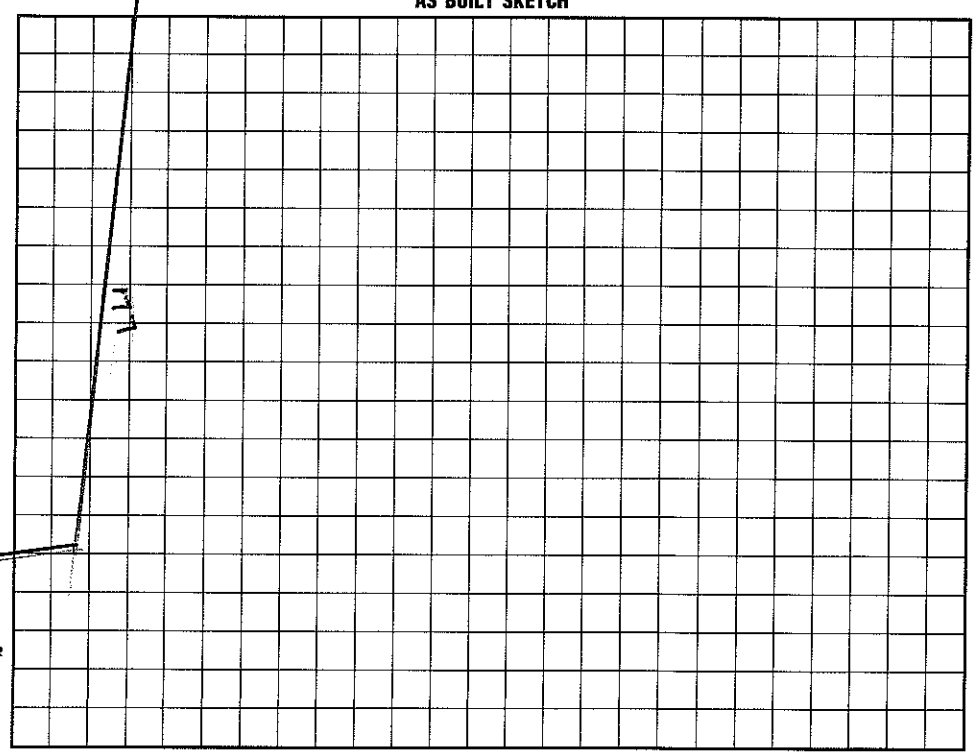
Comments:/Conditions:

71 Panels @ 5.4 = 255

255 ÷ 1.66 (168)

5 tether mat = 9.5 Drawdown

AS BUILT SKETCH



I understand that this 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 _____ Installed by: Mackwood Const.

Improvement Permit by: _____ date _____ Operation Permit by: ~~Wesley Sparkman~~ date 3/10/98

Authorization to Construct by: _____ date _____ Existing System Inspection by: Wesley Sparkman date 3/10/98

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