IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 078527 PIN# 4625 59 4168.4 4626-91-4117 DATE 2/21/03

OWNER OR CONTRACTOR Ethred Custom Homes PHONE: Business 704-987-5022 Home

ADDRESS PO Box 472112 Charlotte, NC 28247

LOCATION 1100 TL GREAT POINT TL WILD HARBOR TL ATLANTIC WAY ON (R)

SUBDIVISION POINT BLOCK / SECTION 3 LOT 324 LOT AREA 43000 FT² SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .2

Septic Tank: 1500 Gallons; STB 339 Date 1/25/04

Pump Tank: 1800 Gallons; PT 421 Date 1/4/04

Pump Make: GOULDS Model WE0-712HH Serial No. 1PWE0712HH

Nitrification Field: No Fields 1 Square Feet 800-1200 Linear Feet 400

No Lines 5 Trench Width 2-3 Max Trench Bottom Depth 30" Gravel Depth N/A

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

System Description: PreDosed - 16" PPBPS

Repair System Description: JAME TYPE

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3.5

☐ Business No. Employees

☐ Other

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community POINT

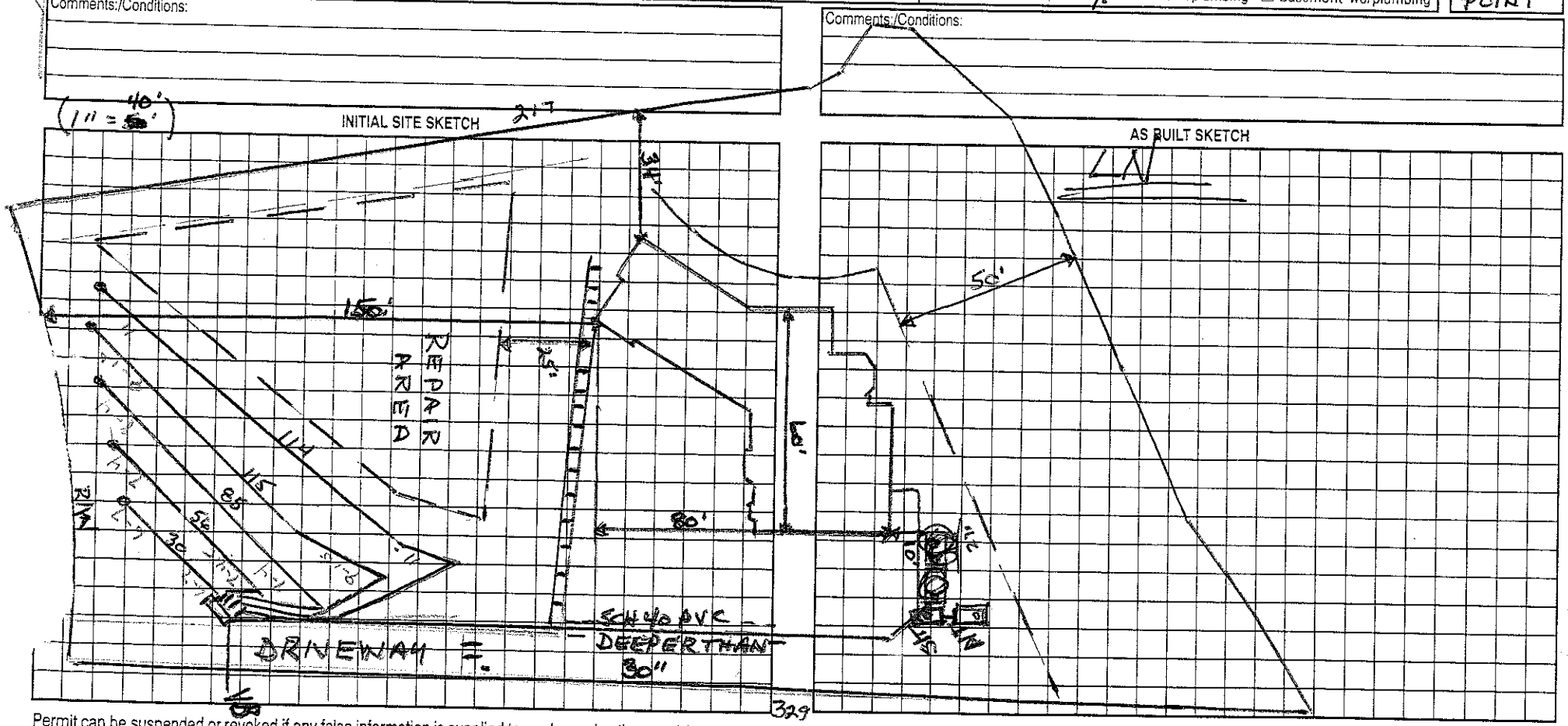
Comments/Conditions:

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(1" = 40')

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: [signature] 4-23-03 date 4-23-03

Improvement Permit by: Wesley Sparks R.S. date 2-21-03

Authorization to Construct by: Wesley Sparks R.S. date 2-21-03

Installed by: Orbison Const.

Operation Permit by: Wesley Sparks R.S. date 5/11/04

Existing System Inspection by: date

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