IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 315.00 Pd MOORESVILLE 704-664-5281

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

PERMIT# 131466 PIN# ~~4626-07-1878.529~~ 4627-20-4901 DATE Sept 29, 05

OWNER OR CONTRACTOR The Farms LLC / HELMS PHONE: Business _____ Home _____

ADDRESS 2214 Brawley School Rd Mooresville, N.C. 28117

LOCATION Brawley School Rd TR McKendree TR Lakeview Shores Loop TL ~~Grant Creek Ln~~ COLLARD FARMS TR Hammermill Farms Ln. 1st/6th Rt.

SUBDIVISION The FARMS BLOCK / SECTION 4 LOT 529 LOT AREA .808Ac SITE CLASS. PS DESIGN FLOW 460gpd L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 533 Date FRALO/PLASTEC

Pump Tank: 1000 Gallons; PT 4587 Date FRALO/PLASTEC

Pump Make: MYERS Model ME-50S2I Serial No. 12/04

Nitrification Field: No Fields 1 Square Feet 540/810 Linear Feet 270

No Lines 3@90' Trench Width 24"min/36"oc Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LPPPBPS

Repair System Description: LPPPBPS

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other ____

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

Water Supply: ☐ Individual ☒ Public ☒ Community

Comments:/Conditions: at 36" max 9'oc

Critical site evaluation and system design performed by Paul Pennington and Kathleen Haven of S&ME

Comments:/Conditions:

INITIAL SITE SKETCH

SEE Plan from S&ME

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: Kathleen Haven date 9/30/05 Installed by: Harley Miller Services

Improvement Permit by: [signature] date 9-29-05 Operation Permit by: Wesley Sparks RS date 3/7/07

Authorization to Construct by: Cindy Mercelli date 6-9-06 Existing System Inspection by: _____ date _____

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