IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 136728 PIN# 4635 70 6316 DATE 9/8/06

OWNER OR APPLICANT Bobby Honeycutt PHONE: Business 704-896-0566 Home

ADDRESS 19600 Callaway Hills Ln Davidson, NC. 28036

LOCATION 1155 TR Langtree Rd. TR 2nd Lakeshore Dr. Property on (L) in curve

SUBDIVISION Lakeview Shores BLOCK / SECTION LOT 7 LOT AREA .58 Ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 312 Date 7-31-06
Pump Tank: Gallons: PT Date
Pump Make: Model 702 Serial No. 234
Nitrification Field: No Fields 1 Square Feet Linear Feet 200
No Lines ~~4@50~~ Trench Width 2-3' Max Trench Bottom Depth 3' Gravel Depth No

☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: GRAV - 16" PPBPS
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

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

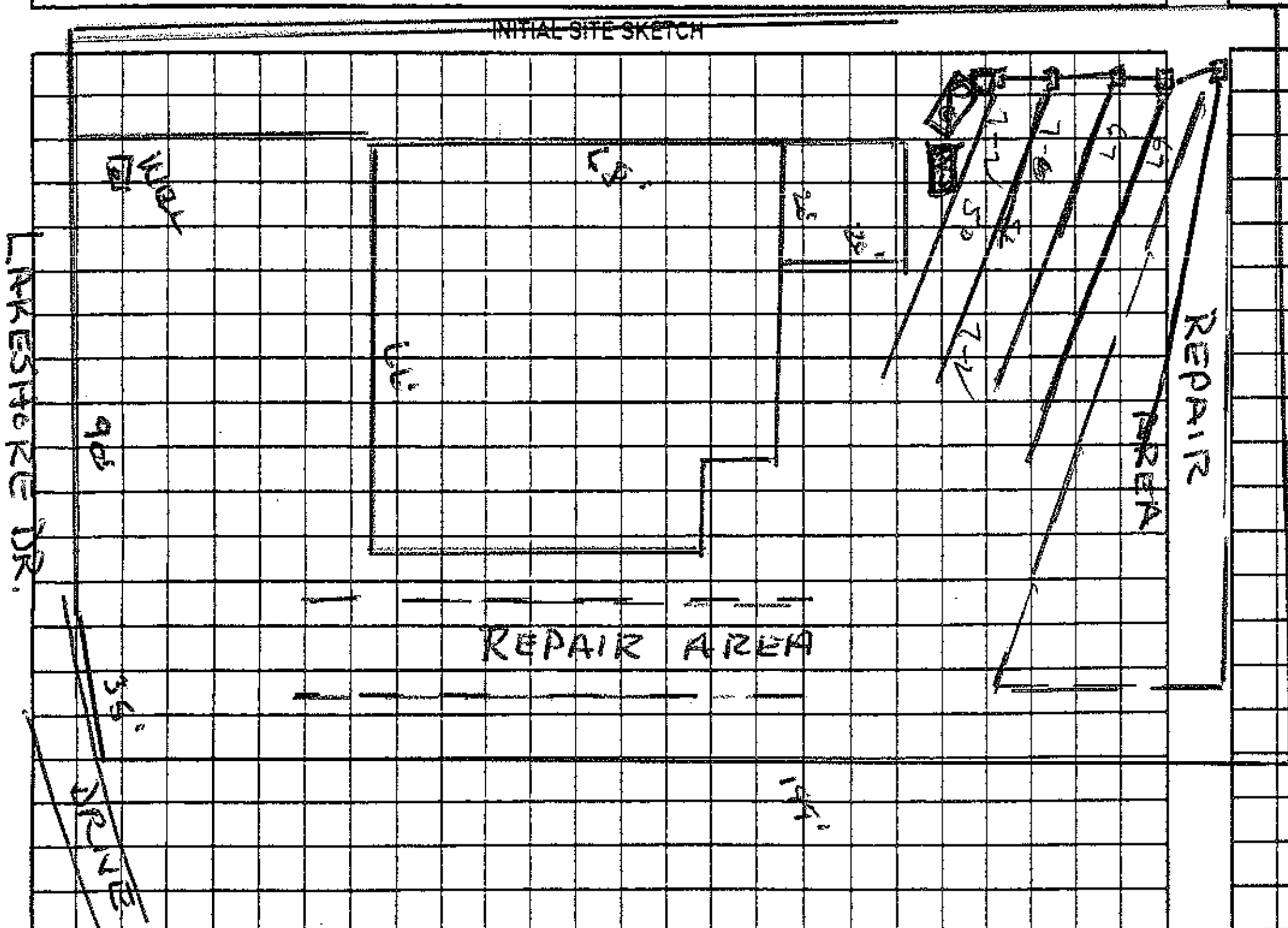
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons No. Employees

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: (1" = 40')

Comments:/Conditions: Red Polylok filter 2 lines 67' 2 lines 50

INITIAL SITE SKETCH



AS BUILT SKETCH

well installed as drawn at time of installation

Gravity panel installed

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] date 10-6-06 Installed by: KJ Ervin

Improvement Permit by: Wesley Sparks RS. date 9/8/06 Operation Permit by: Wesley Sparks RS. date

Authorization to Construct by: Wesley Sparks RS date 9/8/06 Existing System Inspection by: date

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