IREDELL COUNTY HEALTH DEPARTMENT

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

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

130.00 Paid Sammy 902 687

PERMIT# 124663 PIN# 4636307807 DATE 1-6-05

OWNER OR CONTRACTOR Scott Ward (David Wright) PHONE: Business 779-4277 Home 799-0903

ADDRESS P.O. Box 5443 Mooresville NC 28117

LOCATION Brawley School Rd TL Stutts Rd TR Poinsettia Ln on right

SUBDIVISION Stutts Cove BLOCK / SECTION ____ LOT 50 LOT AREA ____ SITE CLASS. ____ DESIGN FLOW 480 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 4-4-05
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

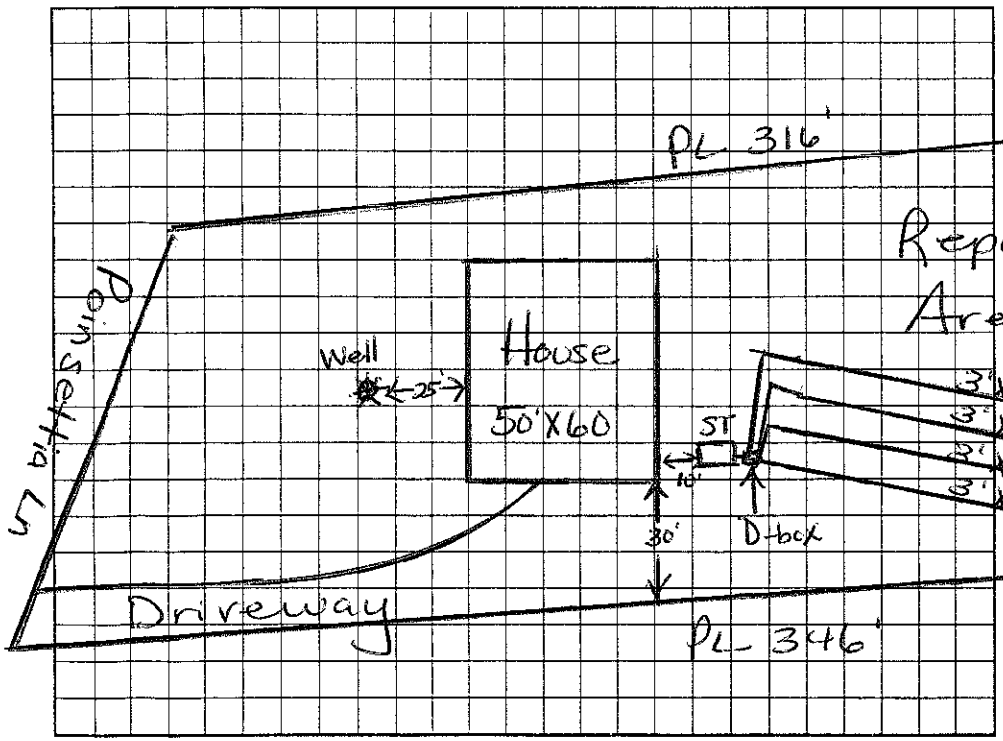
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 4 No. Bathrooms 3.5 No. Employees ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Keep Septic System at least 10' from PL & 10' from house. Keep well at least 25' from house, 100' from Drainfield & >40' from right side line

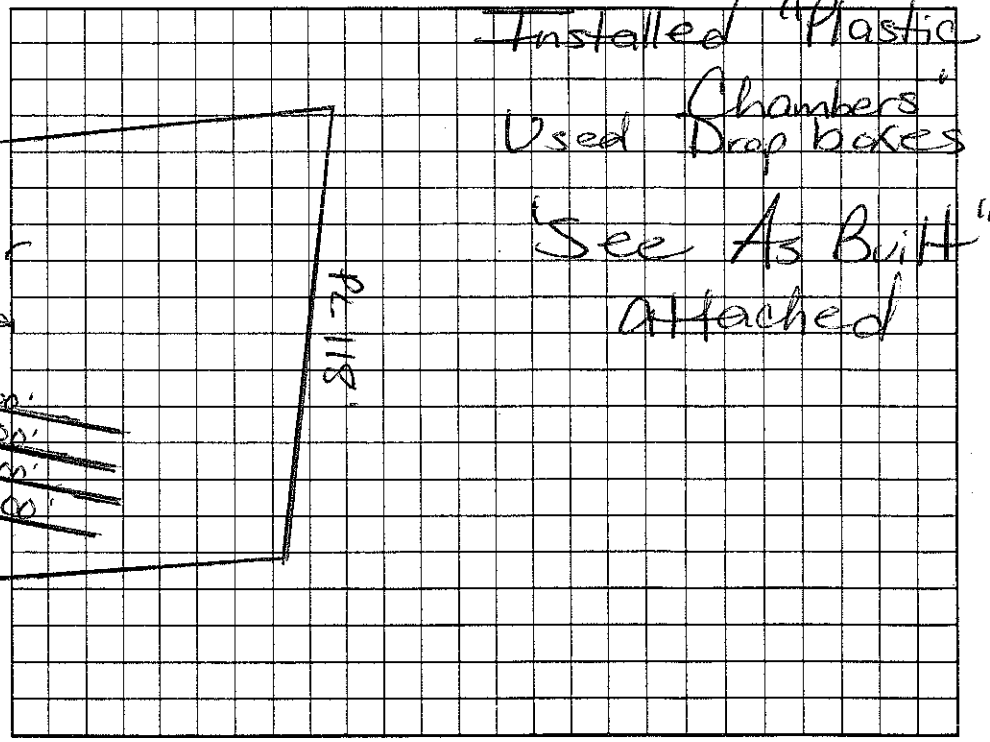
Comments/Conditions: Okay to use "Drop boxes" instead of Distribution box
Put Initial System in Repair area instead.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed "Plastic Chambers" Used Drop boxes "See As Built" Attached



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: Scott Ward date 4/7/05 Installed by: Iredell Backhoe & L&L

Improvement Permit by: Maria H. Dotson RS. date 1/6/05 Operation Permit by: Maria H. Dotson date 5/5/05

Authorization to Construct by: Maria H. Dotson RS date 1/6/05 Existing System Inspection by: ____ date ____

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

As Built

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

PERMIT# 124663 PIN# 4636307807 DATE 5-5-05

OWNER OR CONTRACTOR Scott Ward PHONE: Business 779-4277 Home

ADDRESS

LOCATION

SUBDIVISION Stotts Cove BLOCK / SECTION LOT 50 LOT AREA SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 4-4-05
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: Pump - 25% Red.
Maintenance Agreement Required: ☐ Yes ☐ No

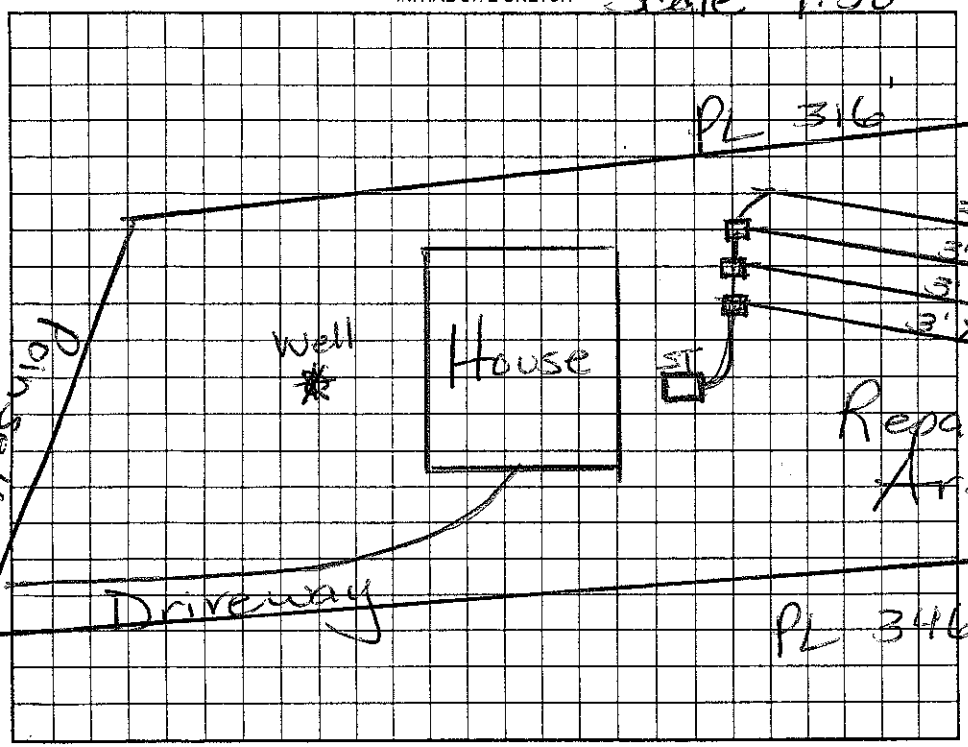
X House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3.5
☐ Business No. Employees
☐ Other
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
X Individual
☐ Public
☐ Community

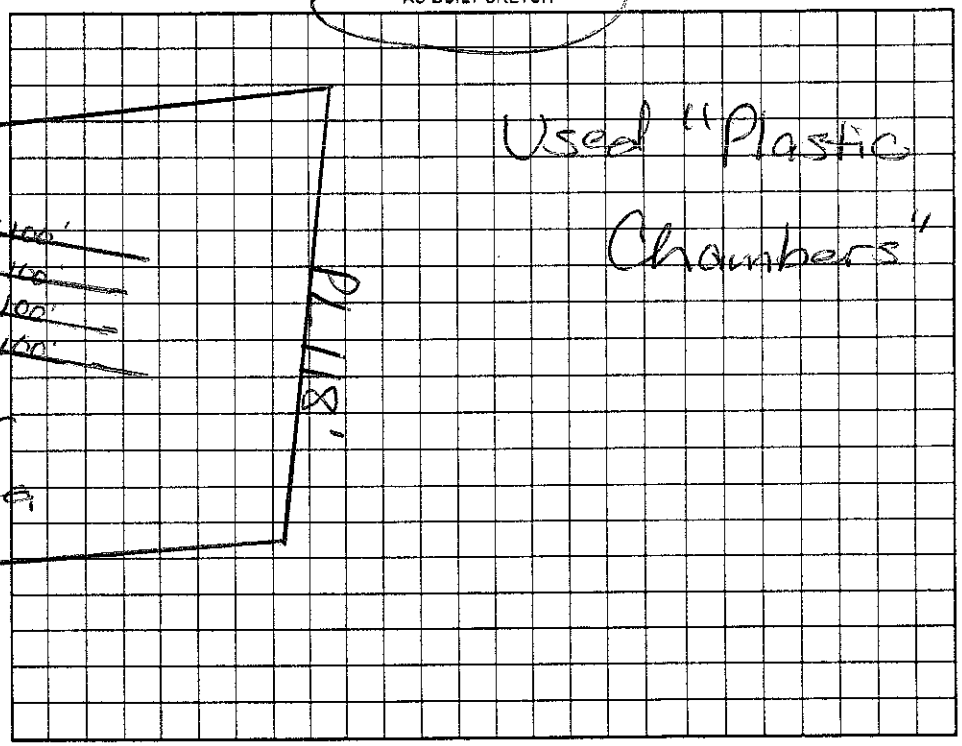
Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH Scale 1:50



AS BUILT SKETCH



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Signed: date

Improvement Permit by: date

Authorization to Construct by: date

Installed by: Iredell Backhoe

Operation Permit by: Marina Hill Dotson RS date 5/5/05

Existing System Inspection by: date

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