IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 128114 PIN# 4636662012 4 DATE 5-20-05

OWNER OR CONTRACTOR Mike Watt / New Watt PHONE: Business Cell 996-4542 Home 663-2252

ADDRESS 720 Shearers Rd Mooresville, NC 28115

LOCATION Brawley School Rd TL Stutts Rd on left right after Woodstream

SUBDIVISION Norman Woods BLOCK / SECTION ____ LOT 1 LOT AREA .53 Acre SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 9-10-05

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 900' Linear Feet 300'

No Lines 7 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% Reduct Accepted

Repair System Description: *Partial - Lot Platted prior to 1983

Maintenance Agreement Required: [ ] Yes [ ] No

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

[ ] Mobile Home No. Bathrooms ____

[ ] Business No. Employees ____

[ ] Other ____

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

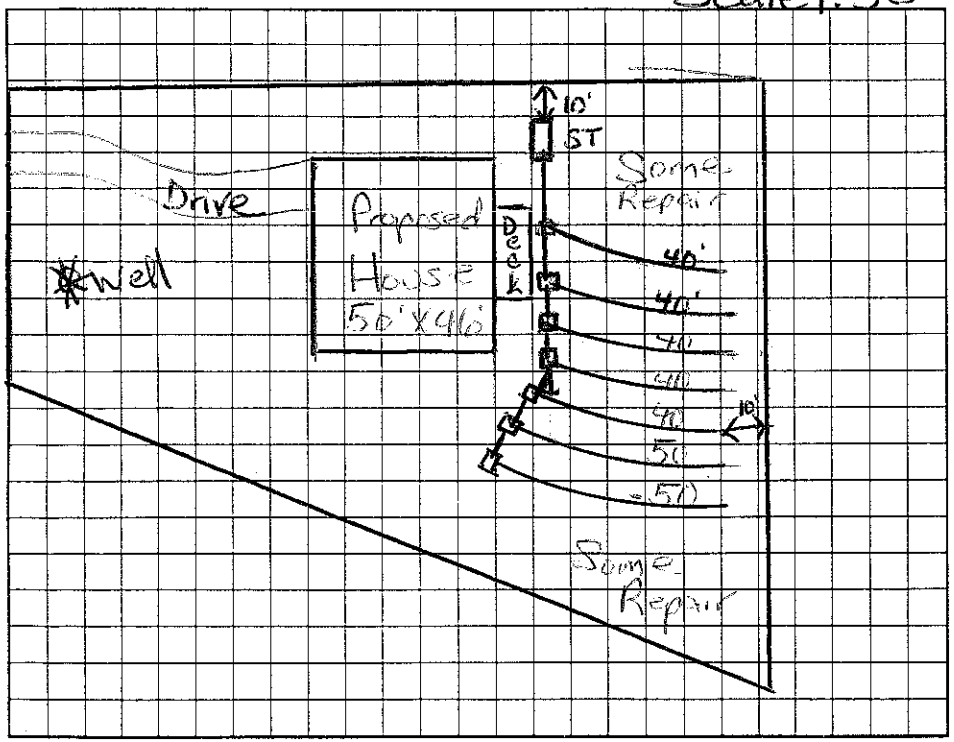
Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions:

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* Lot created prior to 1983; therefore repair not required.
Any future deck can not cover Septic System.

INITIAL SITE SKETCH Scale 1:50



AS BUILT SKETCH

Installed Quick 4 95 Drawn

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: Mike Watt date 5/23/05

Improvement Permit by: Myra H. Dotson RS date 5/20/05

Authorization to Construct by: Myra H. Dotson RS date 5/20/05

Installed by: Brad Warren RS

Operation Permit by: Myra H. Dotson date 10/21/05

Existing System Inspection by: ____ date ____

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