IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 116316 PIN# ~~4636 63 3496~~ 4636 65 3496 DATE 9/24/03

OWNER OR CONTRACTOR Stewart McLamb PHONE: Business Home 704-902-9456

ADDRESS 264 Mallard Way Mooresville, NC. 28117

LOCATION 1100 TL Main Entrance past Clubhouse on (R) past before small gravel street

SUBDIVISION Mallard Head BLOCK / SECTION 2 LOT 165 LOT AREA .50 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: 1000 Gallons; PT 283 Date 9/24/03

Pump Make: Goulds Model WE0512HH Serial No. F0356319

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

No Lines 3@90' Trench Width 2'=8'CNTR 3'=9'CNTR Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, III, (IV), V, VI

System Description: Pressured 16" PPBPS

Repair System Description: Pressured 16" PPBPS infront

Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4

[ ] Mobile Home No. Bathrooms 3

[ ] Business No. Employees

[ ] Other

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

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

Comments:/Conditions:

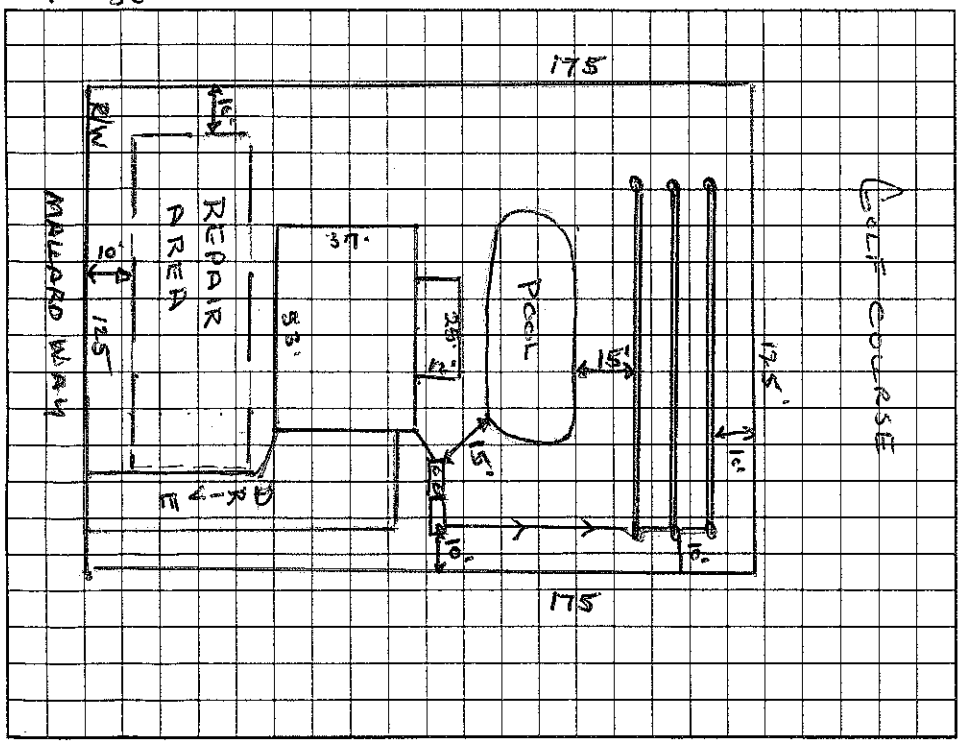
Creating room for swimming pool

Comments:/Conditions:

63 panels
3/16" holes

1" = 50'

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed As 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: [signature] date

Improvement Permit by: Wesley Sparks RS. date 10/3/03

Authorization to Construct by: Wesley Sparks RS date 10/3/03

Installed by: Hallman Const.

Operation Permit by: [signature] date 10/30/03

Existing System Inspection by: date

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