9:30

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-[illegible]4-5281

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

PERMIT# 081072 PIN# 4636 77 9213 DATE 5/13/99

OWNER OR CONTRACTOR Don Mater PHONE: Business 847-7026 Home

ADDRESS 3300 Windrow Lane Matthews, NC. 28105

LOCATION Brawley TL Conveslock TR Old Squaw on Rt.

SUBDIVISION MALLARD HEAD BLOCK / SECTION LOT 44 LOT AREA .46(20037) SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 312 Date 5-4-99
Pump Tank: 1000 Gallons; PT 27 Date 7-17-99
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 600 Linear Feet 200
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND

[X] New System [ ] Repair System Type: I, II, III, (IV), V, VI
System Description: Pressure - 16" PPBS
Repair System Description: Prior to 83 - 100% not Region
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 2
[ ] Business No. Employees
[ ] Other
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

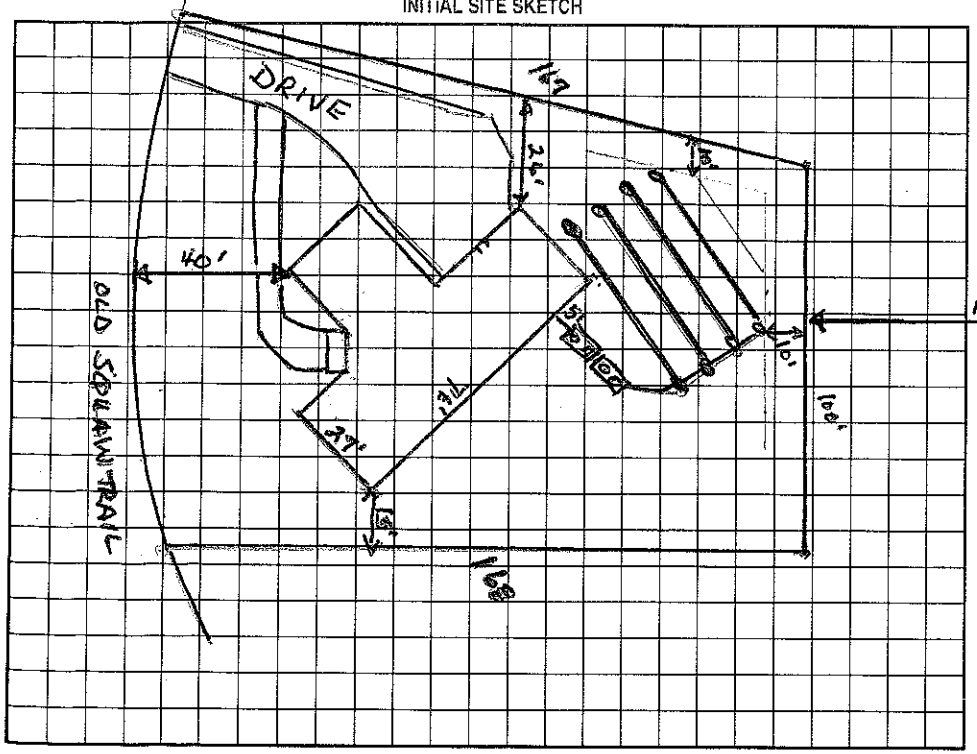
Water Supply:
[ ] Individual
[ ] Public
[X] Community MALLARD HEAD.

Comments:/Conditions: Filter & riser installed

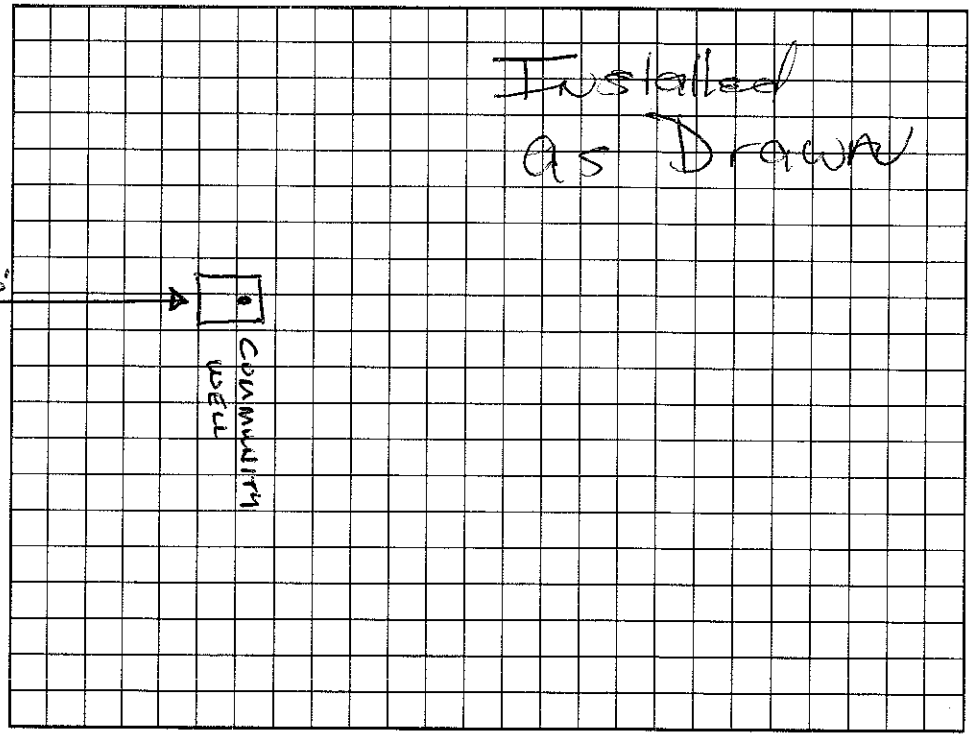
Comments:/Conditions: Tanks, lines & pressure checked 9/20/99 MD

(1" = 50')

INITIAL SITE SKETCH



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: [signature] date 5-25-99 Installed by:

Improvement Permit by: Wesley Sparks RS. date 5/19/99 Operation Permit by: Wesley Sparks RS date 10/14/99

Authorization to Construct by: Wesley Sparks RS. date 5/19/99 Existing System Inspection by: date

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