IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 104222 PIN# ~~4652-46-9579~~ 4637.46-9532 DATE 1/14/02

OWNER OR CONTRACTOR Genesis Developers PHONE: Business 704-664-3400 Home

ADDRESS 249 Williamson Rd Mooresville NC 28117

LOCATION 150 W, TL Bodie, TR Purple Finch, on LT

SUBDIVISION Whippoorwill Woods BLOCK / SECTION II LOT 13 ~~14~~ LOT AREA 1.7 AC. SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25

Septic Tank: 1000 Gallons; STB 794 Date 2/5/02

Pump Tank: 1000 Gallons; PT 283 Date 2/4/02

Pump Make: Meyers Model ME3H Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 3 Trench Width 24" or 36" Max Trench Bottom Depth 36" Gravel Depth —

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

System Description: LP Panel Block

Repair System Description: Same

Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

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

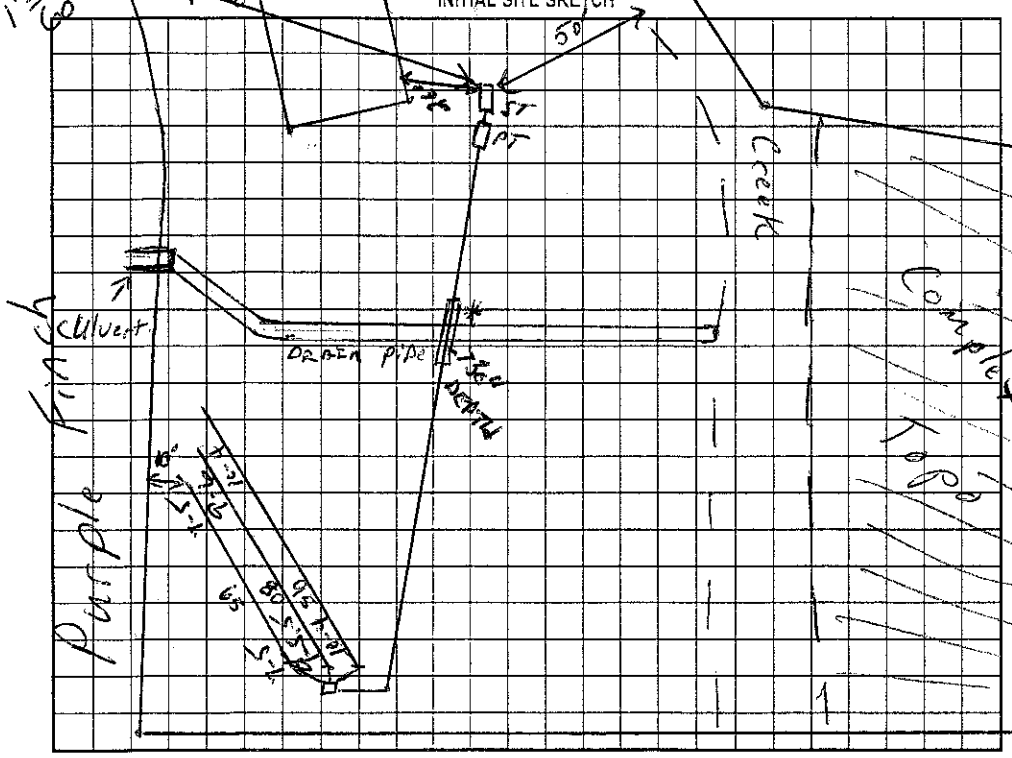
Comments/Conditions:

* Supply line Need 12" of separation from Drain pipe or be sleeved in Ductile Iron 5' to either side of Drain pipe

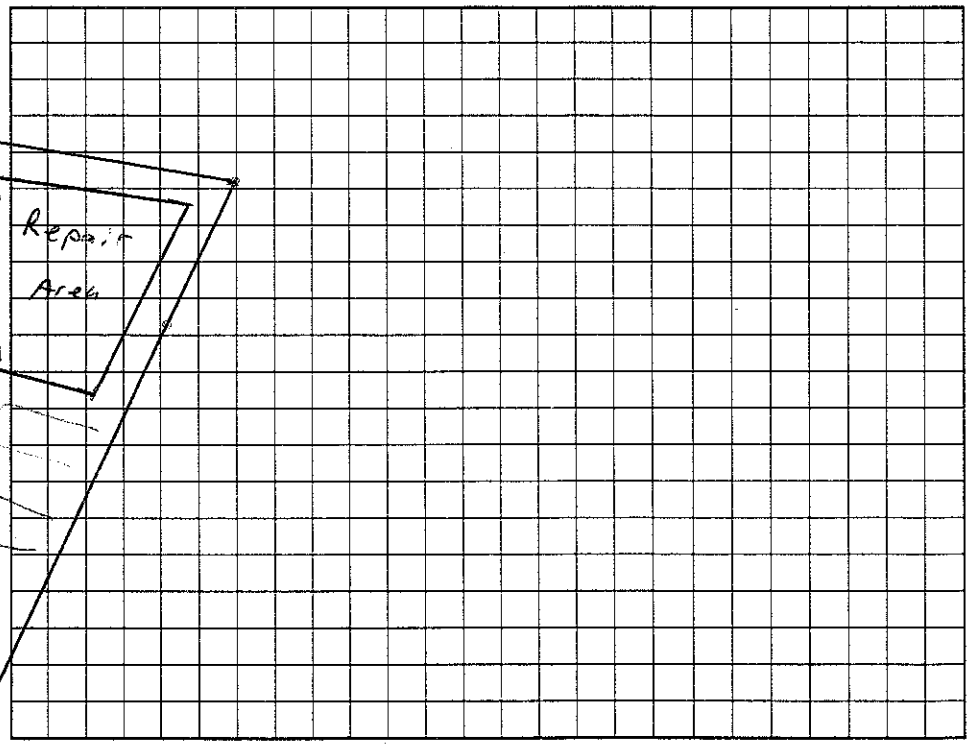
Comments/Conditions:

20 @ 95 I-70

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: Donna S Rogers date 1/15/01 Installed by: Tim Ammons

Improvement Permit by: RS date 1/14/02 Operation Permit by: RS date 5/16/02

Authorization to Construct by: RS date 1/14/02 Existing System Inspection by: date

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