IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 PT MOORESVILLE 704-664-5281

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

PERMIT# 079649 PIN# 4638 28 9918 DATE 3/18/99

OWNER OR CONTRACTOR Andrew Humm PHONE: Business _____ Home _____

ADDRESS @ 1287 Sylvan Dr. Hartland MI. 45393

LOCATION 150W TR Perth TL Fernhill TL 2ND KENWAY LP, bear L ~ .6 mile on (R)

SUBDIVISION CL+T BLOCK / SECTION 15 LOT 42 LOT AREA ~1.00AC SITE CLASS. RS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 3/18/01
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 825* Linear Feet 275*
No Lines 4 Trench Width 3' Max Trench Bottom Depth 3'

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY - 16" APBS *
Repair System Description: DEEDED B-4 1977
Maintenance Agreement Required: [ ] Yes [X] No
Gravel Depth SAND.

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

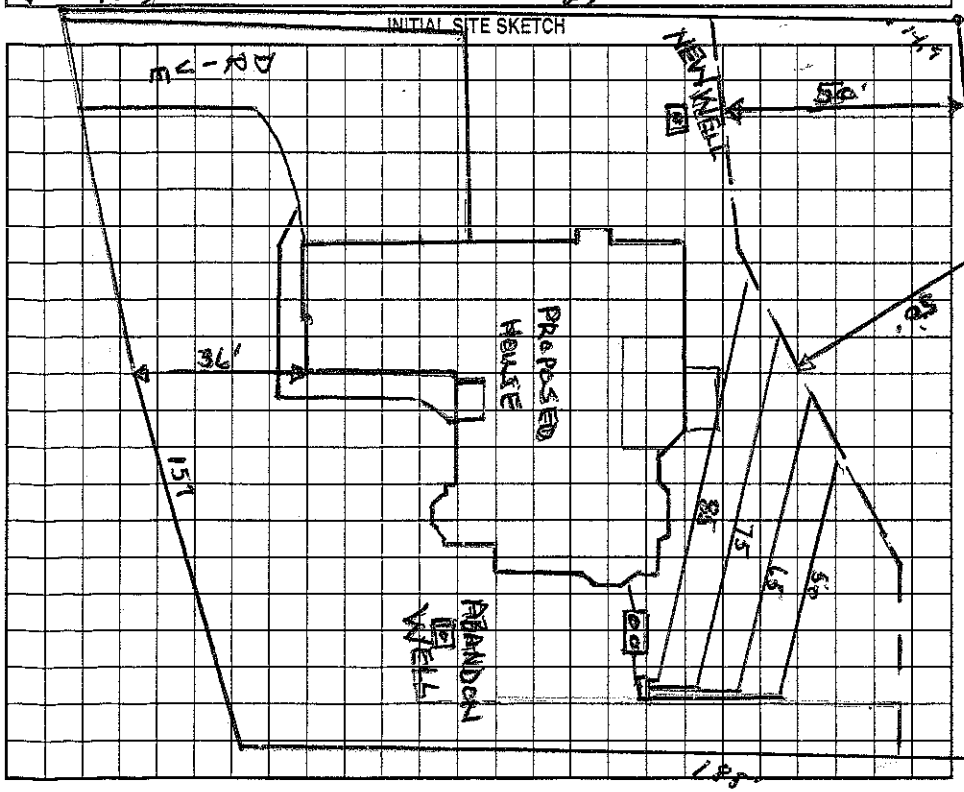
Water Supply:
[X] Individual
[ ] Public
[ ] Community

Comments:/Conditions: * This is a 50% reduced system.

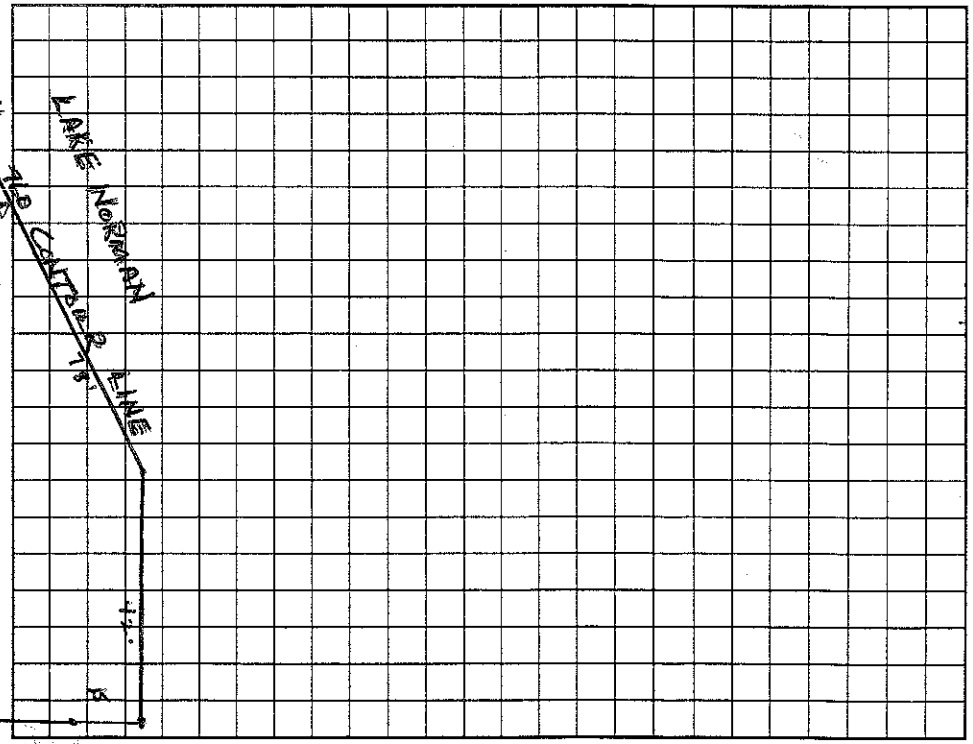
Comments:/Conditions: * Well abandonment log attached.

(1" = 40')

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: X _____ date 10/22/00 Installed by: Lewon Benton

Improvement Permit by: Wesley Sparks R.S. date 10/23/00 Operation Permit by: Maria H. Dotson R.S. date 8/29/2001

Authorization to Construct by: Wesley Sparks R.S. date 10/23/00 Existing System Inspection by: _____ date _____

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