IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 151517 PIN# 4638906023 Chris Moroch 634-1959 DATE 9/3/08

OWNER OR APPLICANT ~~Barry Ervin~~ CTM Builders PHONE: Business 704-663-7562 Home Same

ADDRESS 733 Pinewood Circle

LOCATION 150 W, TR Ervin Rd, at end

SUBDIVISION Lynnbrook Acres BLOCK / SECTION B LOT 16 LOT AREA 0.46 acres SITE CLASS. P.S. DESIGN FLOW 480 gpd L.T.A.R. .03

Septic Tank: 1000 Gallons: STB ~~524~~ 324 Date 2-11-10

Pump Tank: 1000 Gallons: PT 283 Date 1-12-10

Pump Make: Goulds Model WE0512H Serial No.

Nitrification Field: No Fields 1 Square Feet 1000 Linear Feet 270'

No Lines 6 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth NA ☐ Gravity ☒ ~~Pressure~~ ☐ Slab ☒ ~~Crawl~~ Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ ~~New~~ System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: LP PPBPS

Repair System Description: exempt

Maintenance Agreement Required: ☒ ~~Yes~~ ☐ No

☐ ~~House~~/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons ___ No. Employees ___

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: * Install as designed by Michael Athanos & Associates, Inc.
* maintain all setbacks & Install on contour

Comments:/Conditions: 9/4/09 Reviewed Floor plans & Site plans, in Compliance with original I.P. permit & plan.

INITIAL SITE SKETCH

* Install per specs. Michael Athanos & Associates

AS BUILT SKETCH

Real Filter installed
3/17/2010 Checked tanks
3/19/2010 Checked lines & set 2ft pressure
5/6/2010 Checked Elect & Alarm

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 9-10-08 Installed by: C. Wayne Gibson

Improvement Permit by: [signature] date 9/3/08 Operation Permit by: [signature] date 5/10/2010

Authorization to Construct by: [signature] date 9/3/09 Existing System Inspection by: ___ date ___

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