IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 13907 PIN# 4639 20 4690 3 DATE Nov. 10, 05

OWNER OR APPLICANT Nations Ford Co LLC PHONE: Business _____ Home _____

ADDRESS 4330 Sterlite St. SE Massillon OH 44646

LOCATION 150W TR Perth Rd. (N) TL Town Hill on Right across from Bagby Road

SUBDIVISION Lakewood Crossing BLOCK / SECTION _____ LOT 16 LOT AREA 1.29 ac SITE CLASS. PS DESIGN FLOW 460 gpd L.T.A.R. No. 3

Septic Tank: 1000 Gallons; STB 1077 Date 11-4-06

Pump Tank: 1000 Gallons; PT 17 Date 10-17-06

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: PM 25% Reduction

Repair System Description: LP PPBAS

Maintenance Agreement Required: ☐ Yes ☒ No Initially

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other

Water Supply: ☒ Individual ☐ Public ☐ Community

☐ Gravity ☒ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

Stormwater Diversion Ditch Required in place prior to issuance of O.P.
Verified site evaluation and System design performed by Rollins Soil & Env. Services

Comments:/Conditions:

INITIAL SITE SKETCH

SEE Plan from Rollins Soil & Env. Services

AS BUILT SKETCH

Final ✓ - 12-21-06 JA

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: Ron S Witt

Improvement Permit by: _____ date 11-14-05

Authorization to Construct by: _____ date 11-10-05

Installed by: Brad Johnson

Operation Permit by: _____ date 3-16-06

Existing System Inspection by: _____ date 2-1-07

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