IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 12766 PIN# 4639352060 4639342959 DATE 5-5-05

OWNER OR CONTRACTOR Foothills Land & Development PHONE: Business 828 217-4670 Home 720-9405

ADDRESS 52 River Point Ct Hickory, NC 28601

LOCATION Perth Rd North to Fern Hill TR Marietta on left past Fern Hill Baptist Church

SUBDIVISION Meritta Overlook BLOCK / SECTION ____ LOT 7 LOT AREA .656 SITE CLASS PS DESIGN FLOW 450gpd L.T.A.R. .3

Septic Tank: 1600 Gallons; STB 360 Date 8/23/05
Pump Tank: 1000 Gallons; PT 319 Date 9/21/05
Pump Make: Gould's Model WE20-511 Serial No. ____
Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 270
No Lines 5 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, III, [IV], V, VI
System Description: Pump-LP Panel Black
Repair System Description: Same
Maintenance Agreement Required: [X] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Bathrooms 3.5
[ ] Business No. Employees ____
[ ] Other ____
[X] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

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

Comments/Conditions: Permitted for attached plan Submitted by S&EC and Licensed Soil Scientist Wendell Overby.

Comments/Conditions: 3/16" hole drilled Tanks Checked 12/2/05 WS Lines & pressure checked 12/8/05MD

INITIAL SITE SKETCH

See Attached plan.

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: ____ date 5/9/05

Improvement Permit by: Maria H. Dolan RS date 5/5/05

Authorization to Construct by: Maria H. Dolan RS date 5/5/05

Installed by: Gary Leatherman

Operation Permit by: Maria H. Dolan RS date 2/14/06

Existing System Inspection by: ____ date ____

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