4639 42 0108

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 136482 PIN# 4639 42 0136 .014 DATE August 4 06

OWNER OR APPLICANT Woodridge Partners LLC / TOP NOTCH PHONE: Business _____ Home _____

ADDRESS P.O. Box 3608, Mooresville, N.C. 28117

LOCATION South Rd. (W) to FERN Hill to Blue Ridge Trail 13th lot on left

SUBDIVISION Woodlen BLOCK / SECTION _____ LOT 14 LOT AREA .896 Ac SITE CLASS. P5 DESIGN FLOW 460gpd L.T.A.R. .25

Septic Tank: 1000 Gallons: STB 160 Date 10/30/07

Pump Tank: 1000 Gallons: PT 319 Date 9/8/07

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 320

No Lines 3 CE Trench Width 24" min Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LPP PBS

Repair System Description: LPP PBS

Maintenance Agreement Required: ☒ Yes ☐ No

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

No. Bedrooms 4 No. Persons ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions:

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1/8/08 Tanks checked A.C.

1/9/08 2 lines checked

1/14/08 All lines checked & pressure set.

INITIAL SITE SKETCH

See Plan from S&ME

AS BUILT SKETCH

3/11/08 Electrical checked & System installed as documented on site plan with modified changes.

AC

Maintenance agreement rec'd 3/12/08

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: Kathleen Saunders date 8/11/06

Improvement Permit by: _____ date 8-4-06

Authorization to Construct by: _____ date 2/22/07

Installed by: Gary Leatherman

Operation Permit by: Anthony Coker Jr. date 3/12/08

Existing System Inspection by: _____ date _____

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