IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 pd $130 MOORESVILLE 704-664-5281

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

PERMIT# 105833 PIN# 4639-46-9042 DATE 10/15/03

OWNER OR CONTRACTOR T. Whelan Homes PHONE: Business 704-400-8932 Home

ADDRESS PO Box 4419 Mooresville NC 28117

LOCATION Perth TL Fern Hill TR Tennessee Cir on Lt

SUBDIVISION Northwood BLOCK / SECTION 5 LOT 33 LOT AREA 1.55AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 312 Date 9/10/03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field; No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: Gravity 25% Reduct
Repair System Description: Panel Block
Maintenance Agreement Required: ☐ Yes ☒ No

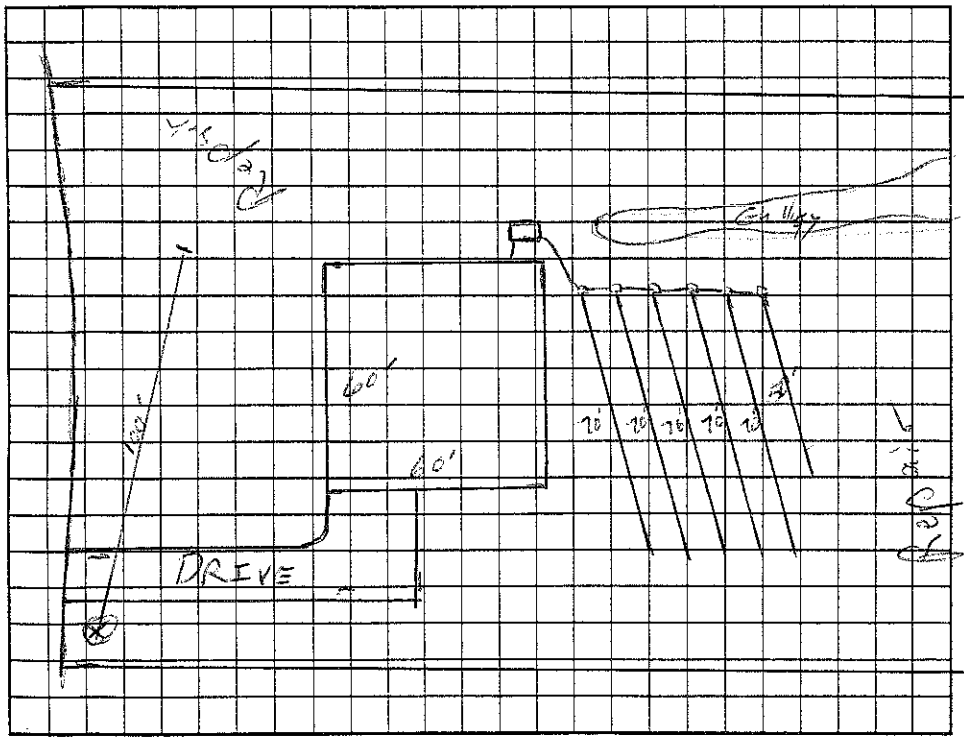
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☒ Individual
☐ Public
☐ Community

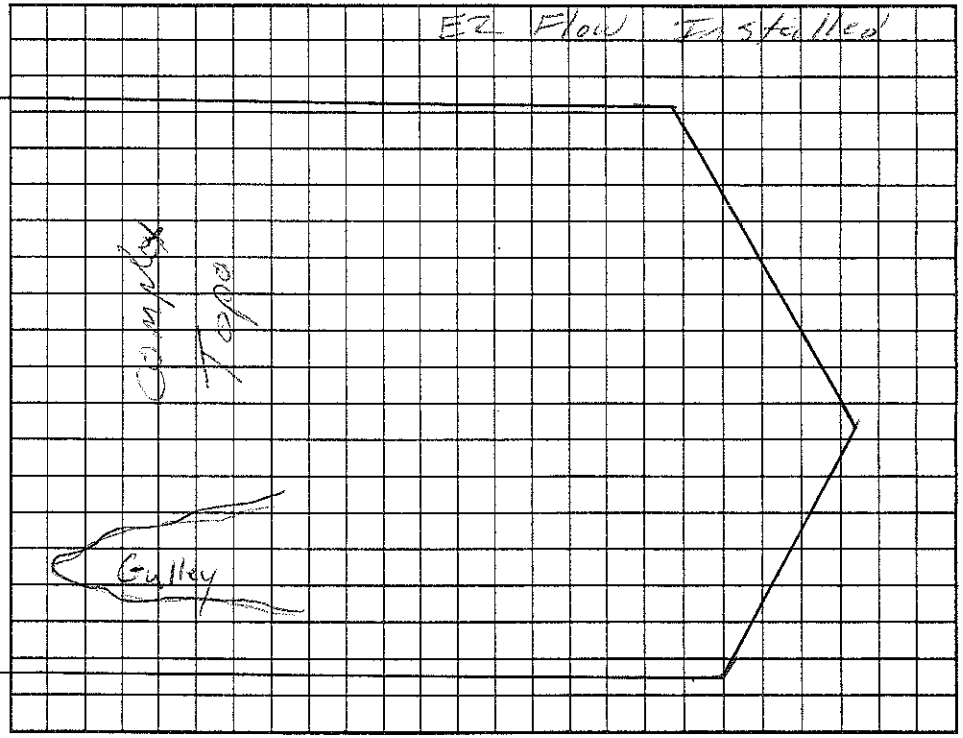
Comments:/Conditions:

Comments:/Conditions:

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: _____ date _____ Installed by: Larry Beam

Improvement Permit by: _____ RS date 10/15/03 Operation Permit by: _____ RS date 10/16/03

Authorization to Construct by: _____ RS date 10/15/03 Existing System Inspection by: _____ date _____

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

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 105833 PIN# 4639-46-9042 DATE 1/22/03

OWNER OR CONTRACTOR T. Whelan Homes PHONE: Business 704-400-8932 Home

ADDRESS PO Box 4419 Mooresville NC 28117

LOCATION Perth, TL Fern Hill, TR Tennessee Cir, on Lt

SUBDIVISION Northwood BLOCK / SECTION LOT 32 LOT AREA 1.55 Ac SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 3/2 Date 9/10/03

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533'

No Lines 6 @ 89' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity Conventional

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

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

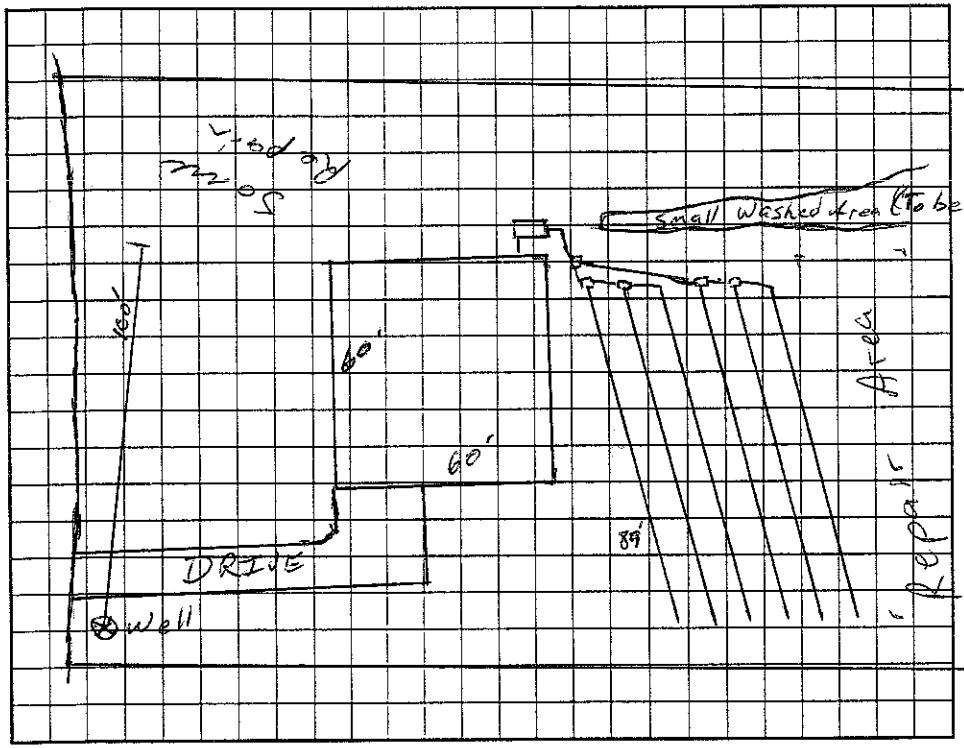
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

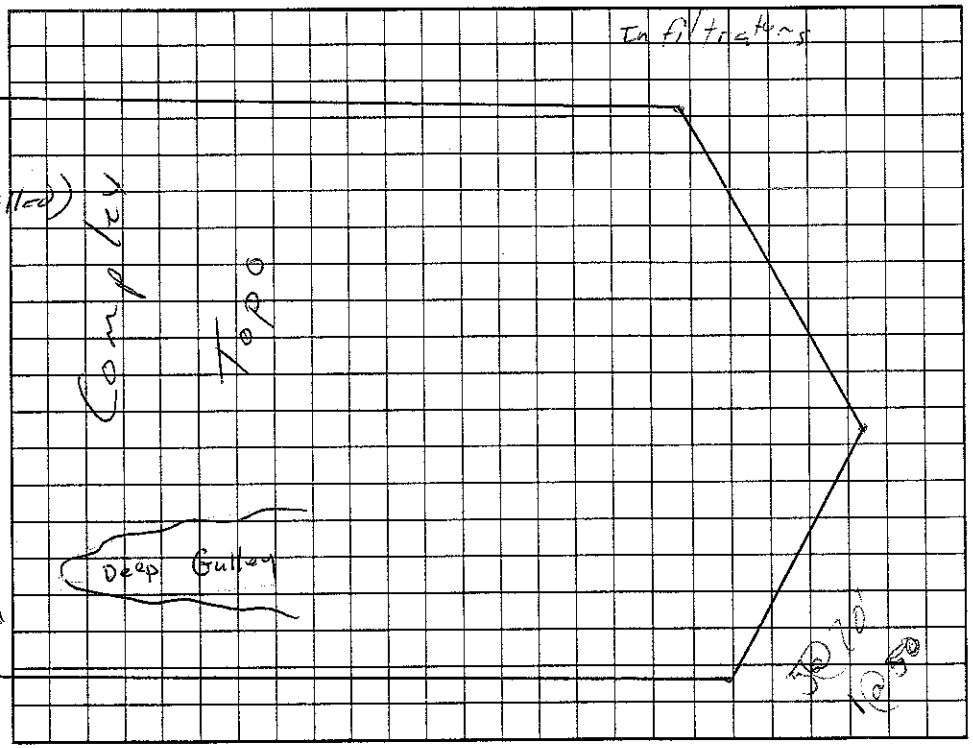
Drainfield site may need slight modification

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



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Signed: Thomas Brooks Jr. date 2-1-03 Installed by:

Improvement Permit by: RS date 1/22/03 Operation Permit by: date

Authorization to Construct by: RS date 1/22/03 Existing System Inspection by: date

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