IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 124979 PIN# 4639632727 (formerly 4639640340.023) DATE 11-20-06

OWNER OR APPLICANT Don Falkenberg PHONE: Business 202-205-3995 Home 703-476-4408

ADDRESS 2969 Treadwell Ln Herndon VA 20171

LOCATION Perth Rd N TL Fern Hill TL Northington Woods Dr at end on left Address: 183 Northington Woods Dr

SUBDIVISION Northington Woods BLOCK / SECTION ____ LOT 23 LOT AREA 1.779Ac SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3gpd/ft²

Septic Tank: 1000 Gallons: STB 1012 Date 5/16/04

Pump Tank: 1000 Gallons: PT 17 Date 4/18/07

Pump Make Gould 3/4HP Model WE0712H Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400

No Lines 6@68' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA ☐ Gravity ☒ Pressure

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

System Description: 2590 reduction pm

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 4 No. Persons 8 No. Employees ____

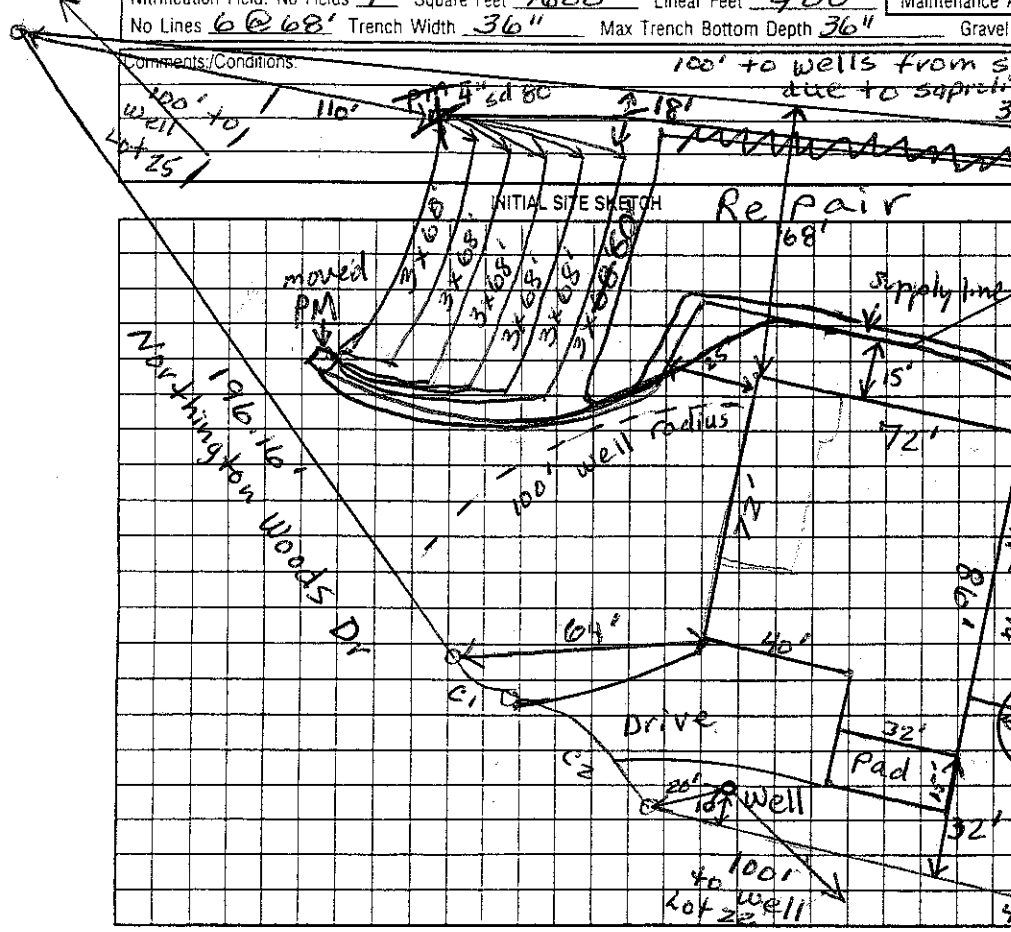
Water Supply: ☒ Individual ☐ Public ☐ Community

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

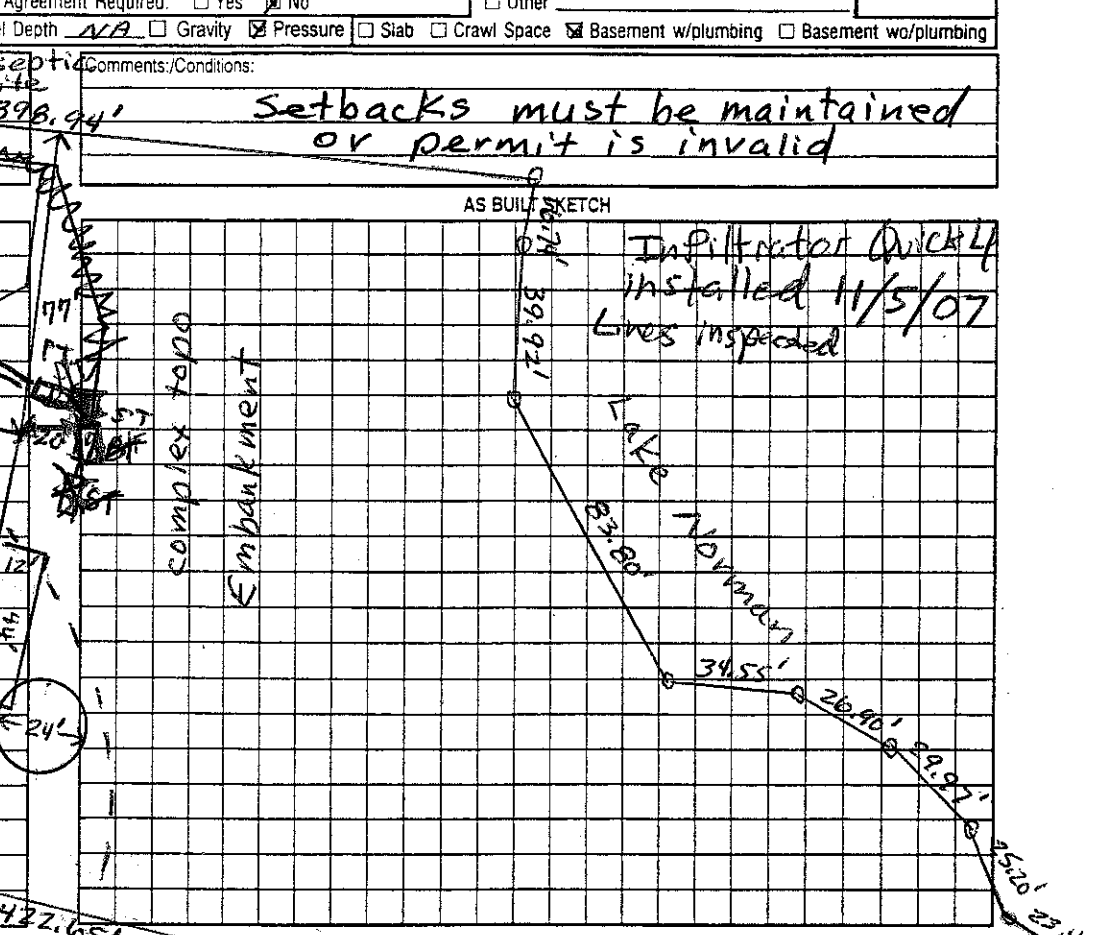
Comments/Conditions: 100' to wells from septic due to saprolite

Comments/Conditions: Setbacks must be maintained or permit is invalid

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: WB Falkenberg date 12/8/06 Installed by: Tommy Frye

Improvement Permit by: Judy McNeill date 11-21-06 Operation Permit by: Wesley Sparks RS date 2/10/09

Authorization to Construct by: Judy McNeill date 11-21-06 Existing System Inspection by: ____ date ____

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