IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 152006 PIN# ~~4639 83 4045 198~~ 4639 840 288 DATE 8/8/08

OWNER OR APPLICANT Ryan West Developers / Meritage Homes PHONE: Business 704-361-1084 Home

ADDRESS 127 B Promenade Dr. Mooresville, NC 28117

LOCATION Perth N TL Bell Crossing continue straight to property on (L)

SUBDIVISION Bells Crossing BLOCK / SECTION ____ LOT 198 LOT AREA 1.73AC SITE CLASS. I PS DESIGN FLOW 480 L.T.A.R. .35

Septic Tank: 1000 Gallons STB 700 Date 11-6

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 484

No Lines 4 Trench Width 3' Max Trench Bottom Depth 3 Gravel Depth No ☐ Gravity ☐ Pressure

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

System Description: GRAY - 25% REDUCTION

Repair System Description: LP - PPBAS

Maintenance Agreement Required: ☐ Yes ☒ No

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

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

Water Supply: ☐ Individual ☐ Public ☒ Community

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

Comments/Conditions: Design, Specifications + Calculations by Rollins Environmental Svcs. 704-658-1723

Comments/Conditions:

INITIAL SITE SKETCH

(1) No changes without written approval from ICHD

(2) Contractor must have Design + Specs. onsite during installation.

(3) Contractor must be State certified

INSTALLED AS SHOWN

484' INSTALLED

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: [signature] date 9/17/08

Improvement Permit by: Wesley Starks RS. date ____

Authorization to Construct by: Judy Melville date 01-07-13

Installed by: CAROLINA PIPE CLEANING

Operation Permit by: [signature] date 3-21-19

Existing System Inspection by: ____ date ____

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