IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 117765 PIN# ~~4639962769.30~~ 4639-86-7159 DATE 4/2/04

OWNER OR CONTRACTOR HONEYSUCKLE CREEK LLC / Lewis Carpenter PHONE: Business 201-6465 Home

ADDRESS 227 HIDEAWAY LN MOORESVILLE NC 28117

LOCATION PERTH (N) - TL 1st HONEYSUCKLE - ON LT

SUBDIVISION HONEYSUCKLE CREEK BLOCK / SECTION LOT 30 LOT AREA 1.944C SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. ~3,660/KF2

Septic Tank: 1000 Gallons; STB 3/2 Date 6/16/06
Pump Tank: 1000 Gallons; PT 27 Date 8/22/06
Pump Make: Goulds Model WE07124 Serial No.
Nitrification Field: No Fields 1 Square Feet 630 Linear Feet 315
No Lines 5 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III (IV) V, VI
System Description: LP PANEL
Repair System Description: SAME
Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other

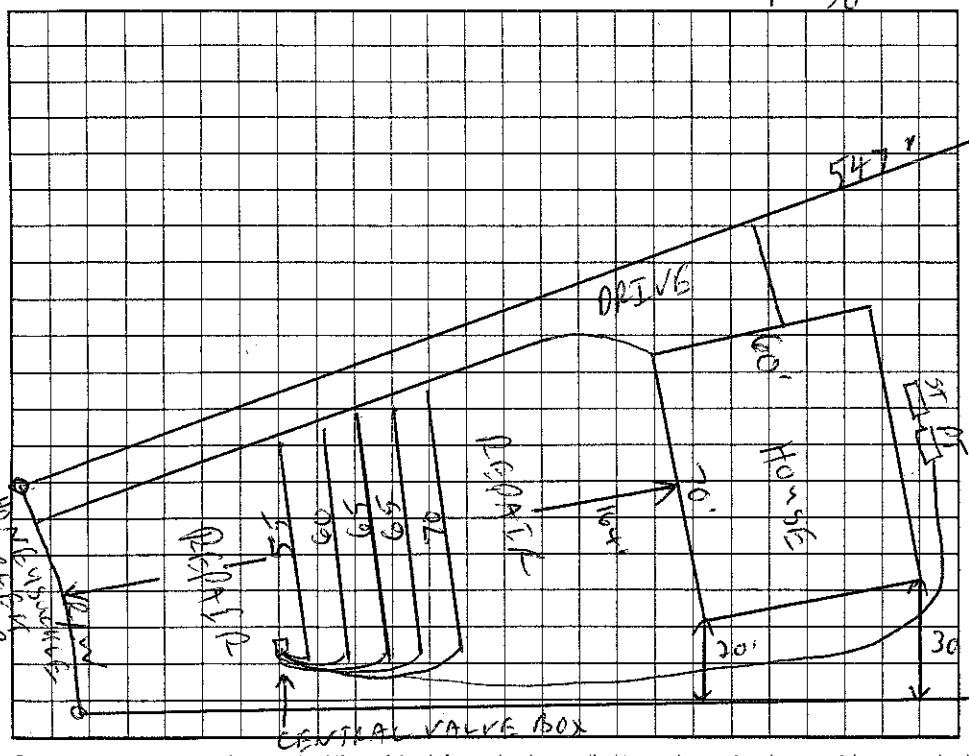
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

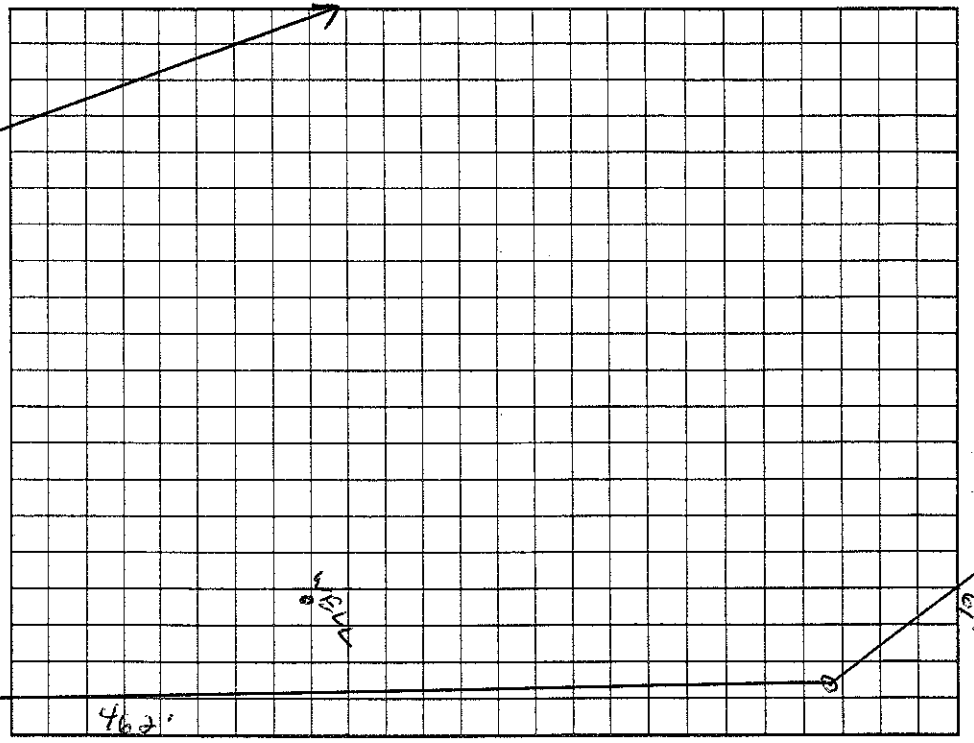
Comments/Conditions: Reviewed Floor plan, in compliance with original permit.

Comments/Conditions: Note: OK to move tanks over to accommodate for future pool.
62 Panel 3/16" holes

INITIAL SITE SKETCH 1"=50'



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: — REC date 7-28-04 Installed by: Larry Beam

Improvement Permit by: RS date 4/2/04 Operation Permit by: RS date 10/3/06

Authorization to Construct by: RS date 10/5/06 Existing System Inspection by: date

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