IREDELL COUNTY HEALTH DEPARTMENT

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

As Built Drawing

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

PERMIT# 106182 PIN# ~~4646207611~~ 4646-17-8871 DATE 8-21-03

OWNER OR CONTRACTOR Ryan Homes PHONE: Business _____ Home _____

ADDRESS _____

LOCATION Williamson Rd TR Sundown Cove TL Corona on left

SUBDIVISION Estates @ Sundown BLOCK / SECTION 2 LOT 14 LOT AREA _____ SITE CLASS PS DESIGN FLOW 480 gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 794 Date 1-10-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines 4@120' Trench Width 36" Max Trench Bottom Depth 36 Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: Pump/Gravity Innovative
Maintenance Agreement Required: ☐ Yes ☒ No

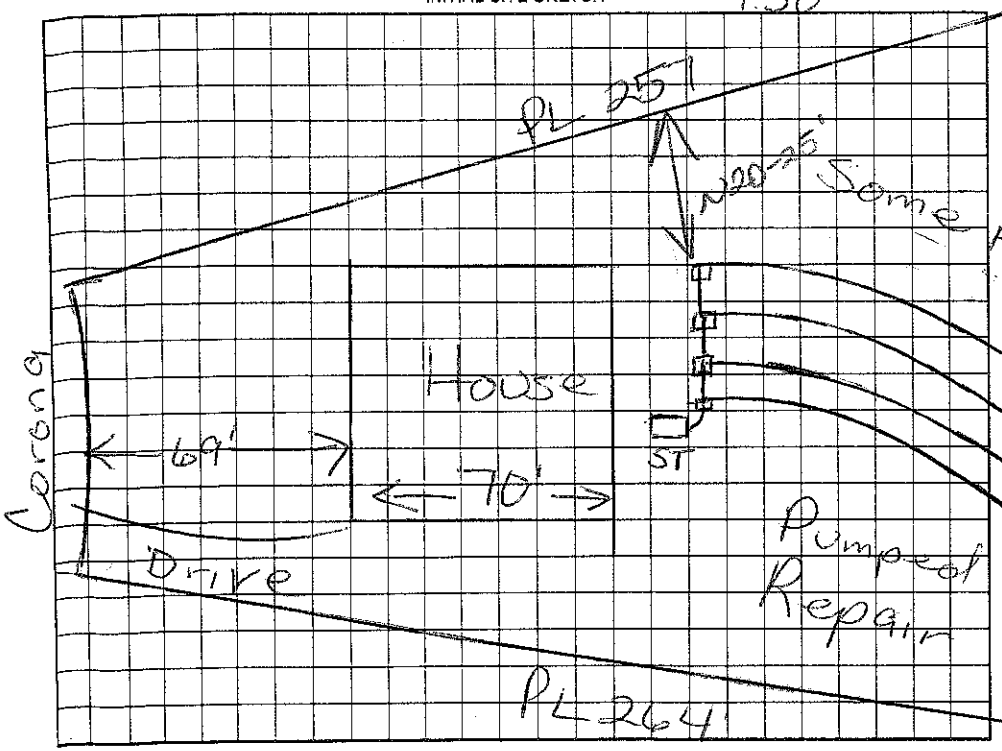
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☒ Basement wo/plumbing

Water Supply:
☐ Individual
☐ Public
☒ Community

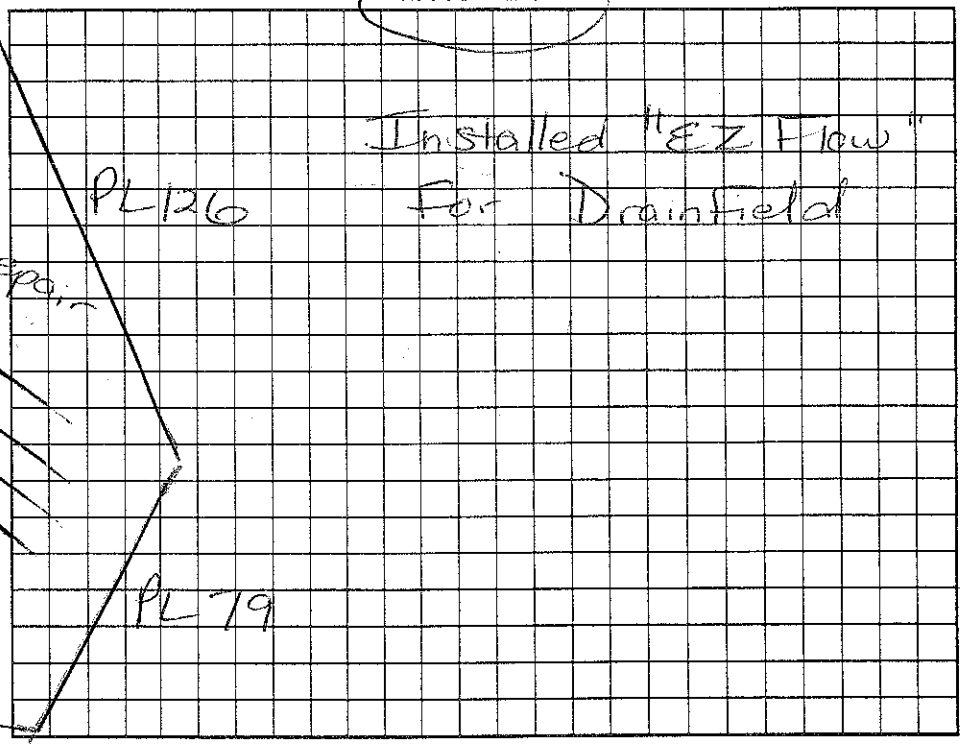
Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH 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: _____ date _____

Improvement Permit by: _____ date _____

Authorization to Construct by: _____ date _____

Installed by: R & H Inc.

Operation Permit by: Maria H. Dotson R.S. date 8/21/03

Existing System Inspection by: Maria H. Dotson date 8/21/03

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# 106182 PIN# 4646 20461 14 DATE 8/15/02

OWNER OR CONTRACTOR DIENST ENTERPRISES / Ryan Homes PHONE: Business 309-0123 Home

ADDRESS 19315 W. CATAWBA AVE. SUITE 200 CORNELIUS NC 28031

LOCATION WILLIAMSON - TR SUNDOWN - TR SUNDOWN COVE - TL CORONA - ON LT #207

SUBDIVISION ESTATES@SUNDOWN BLOCK / SECTION LOT 14 LOT AREA 37037 ft² SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .25 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 1-10-03
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines 4@120' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY INNOVATIVE
Repair System Description: PUMP/GRAVITY SAME
Maintenance Agreement Required: ☐ Yes ☑ No

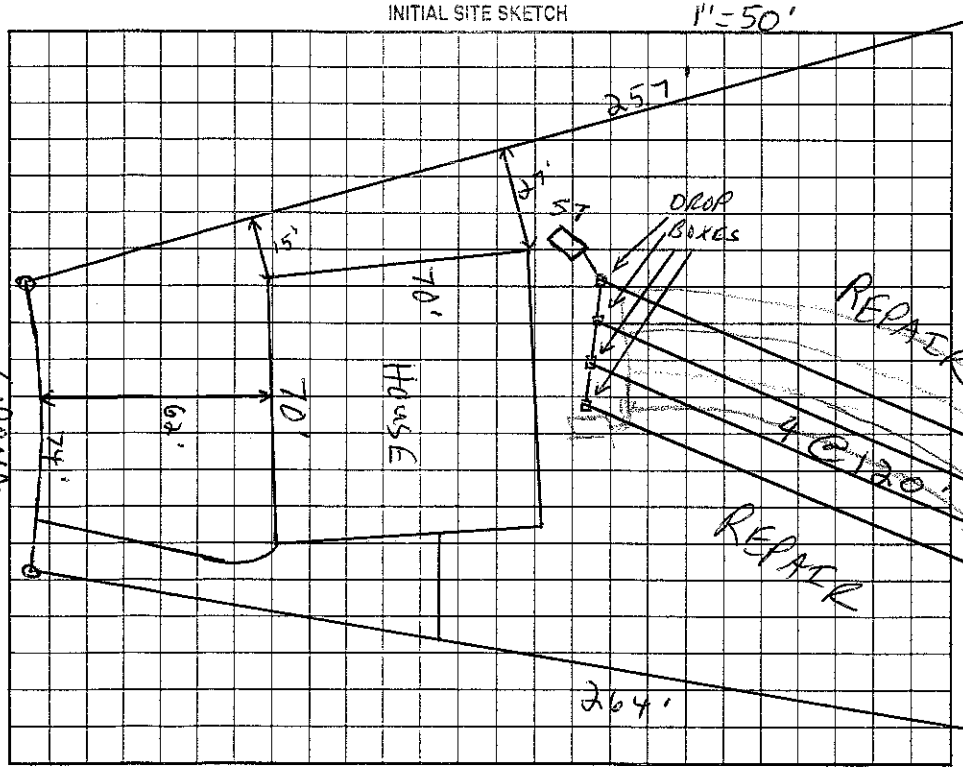
☑ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

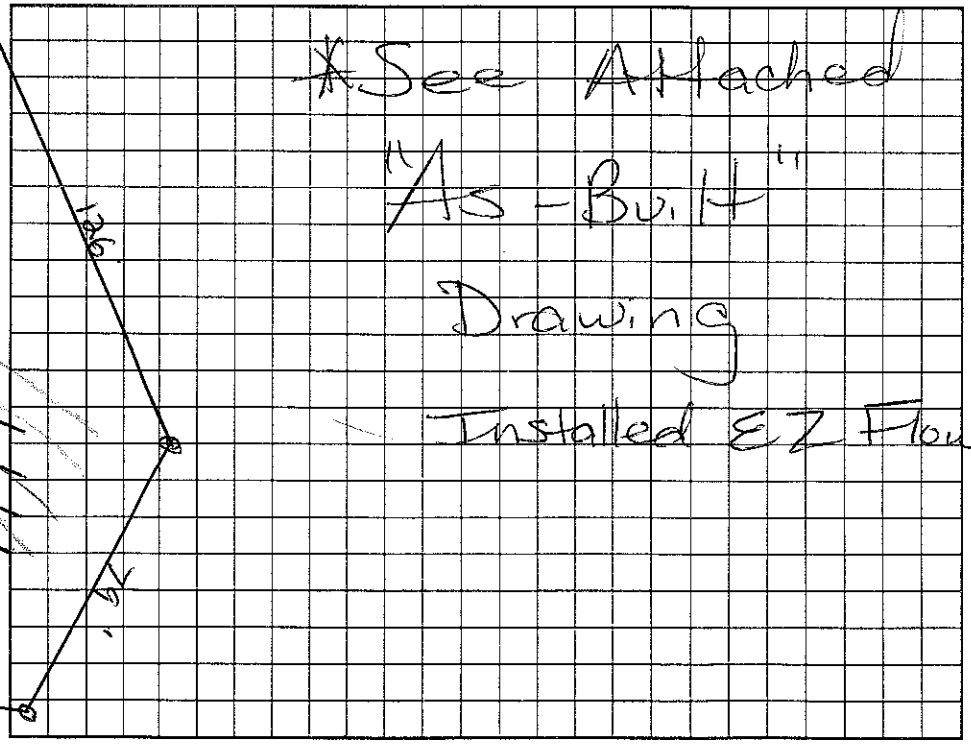
Comments:/Conditions: Renewed Building plans & Site plan 4/4/03; essentially in compliance with I.P.

Comments:/Conditions:

INITIAL SITE SKETCH 1"=50'



AS BUILT SKETCH



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Signed: Robert B. Dienst date 9/20/02

Improvement Permit by: R.S. date 8/15/02

Authorization to Construct by: Maria H. Dotson R.S. date 4/4/03

Installed by: R & H

Operation Permit by: Maria H. Dotson R.S. date 8/21/03

Existing System Inspection by: Maria H. Dotson R.S. date 8/21/03

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