IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 106026 PIN# ~~4646 20 46 11.2~~ 4646289257 DATE 8/28/02

OWNER OR CONTRACTOR DIENST ENTERPRESES / RYAN HOMES PHONE: Business 309-0123 Home

ADDRESS 19315 W. CATAWBA AVE CORNELIUS NC 28031

LOCATION WILLIAMSON – TR SUNDOWN – TR SUNDOWN COVE. TL 1ST CORONA - ON LT

SUBDIVISION ESTATES @ SUNDOWN BLOCK / SECTION LOT 2 LOT AREA 25,000 ft² SITE CLASS. PS DESIGN FLOW 480GPD L.T.A.R. .250 GPD/FT²

Septic Tank: 1000 Gallons; STB 312 Date 4-28-04

Pump Tank: 1000 Gallons; PT 283 Date 12-31-04

Pump Make: Gould's Model WE0312M1 Serial No.

Nitrification Field: No Fields 1 Square Feet 640 Linear Feet 320

No Lines 4 @ 80' 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

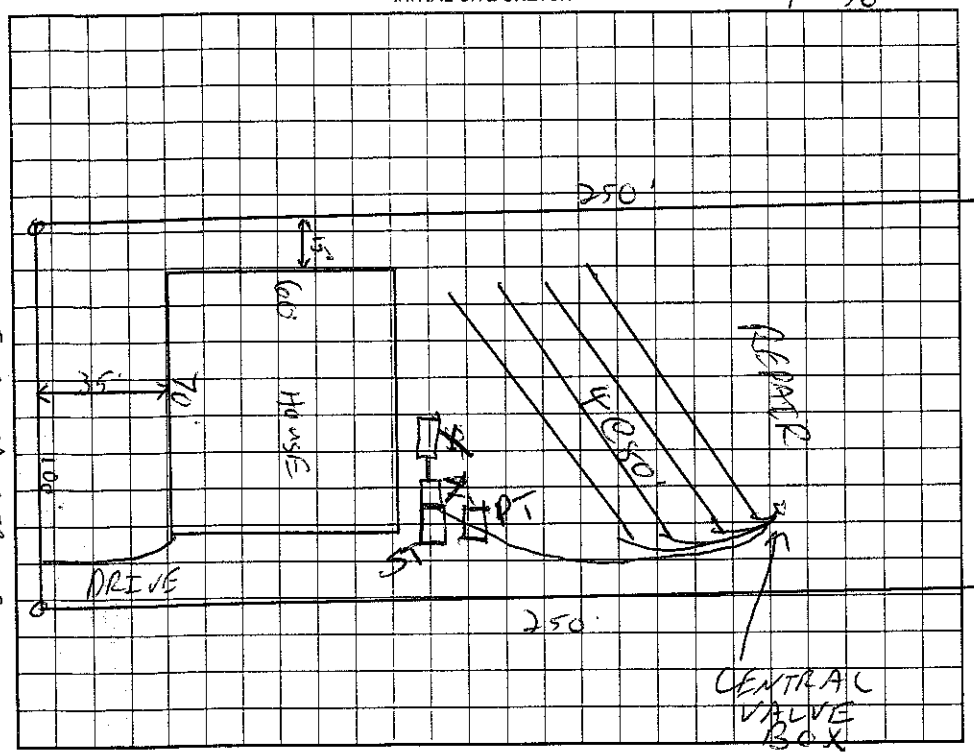
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☑ Community

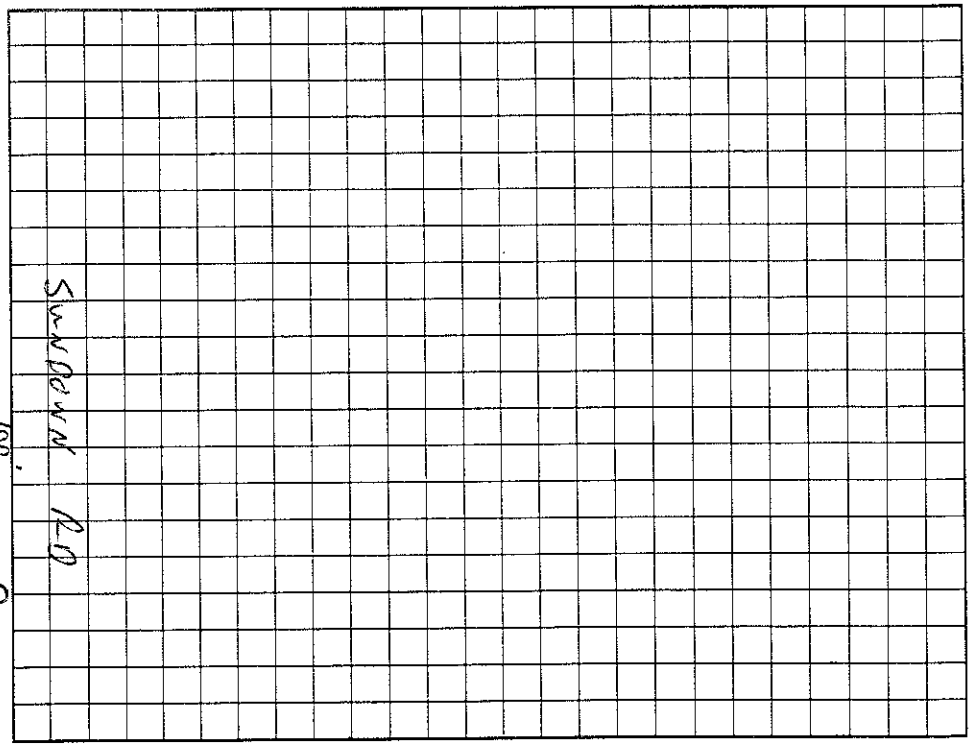
Comments/Conditions: 1) ~~Inline~~ INLINE PUMP FILTER TO BE INSTALLED

Comments/Conditions: Checked 3 of 4 lines 5/9/05
Checked 4th line 5/10/05

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: Robert B. Dienst date 9/20/02

Improvement Permit by: [signature] RS date 8/28/02

Authorization to Construct by: [signature] RS date 2/9/05

Installed by: R & H

Operation Permit by: [signature] date 6/15/05

Existing System Inspection by: date

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