IREDELL COUNTY HEALTH DEPARTMENT

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

130.00 Paid

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

PERMIT# 111142 PIN# 4647 20 0218 DATE 2/18/03

OWNER OR CONTRACTOR James Butler PHONE: Business Bennett - 828-241-3015 Home

ADDRESS 3 Pine Lane Holbrook, NY 11757 111 Pondridge

LOCATION 1100 TL Farmstead TL Pondridge to lot on (L) at culdesac

SUBDIVISION Farmstead BLOCK / SECTION 2 LOT 65 LOT AREA .7Ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1000 Date 3/20/03
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 900 * Linear Feet 300 *
No Lines 4@75' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: GRAV - 25% Reduced
Repair System Description: 16" PPBPS
Maintenance Agreement Required: [ ] Yes [X] No

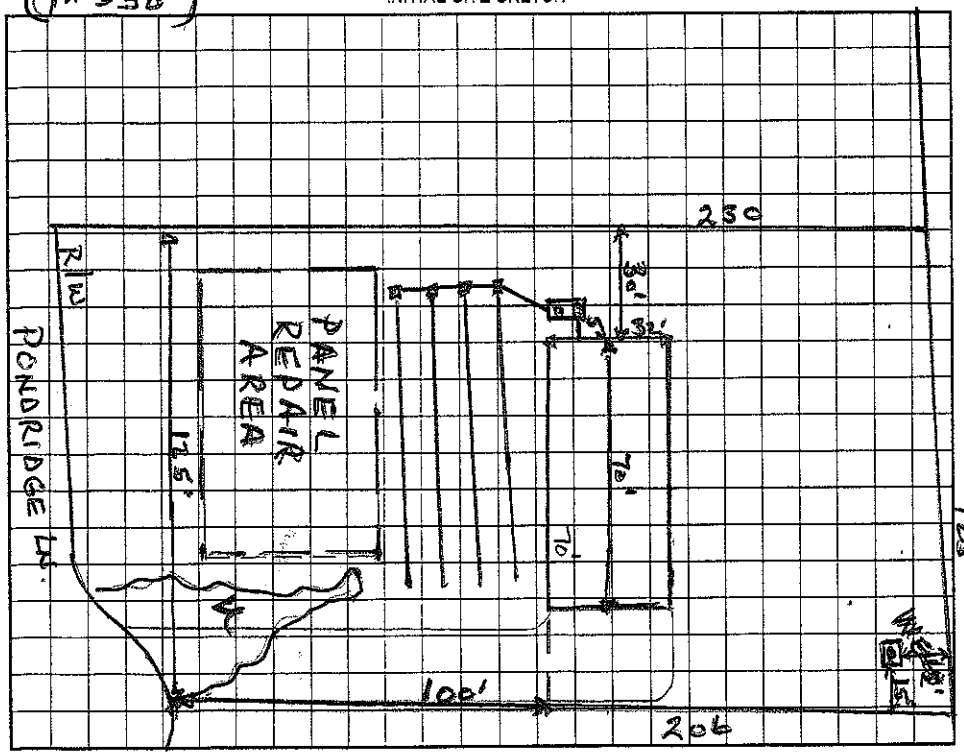
[X] House/Mod. Home No. Bedrooms 3
[ ] Mobile Home No. Bathrooms 2.5
[ ] Business No. Employees ____
[ ] Other ____
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Water Supply: [X] Individual [ ] Public [ ] Community

Comments:/Conditions: * Builder requested that shallow filter not be used on this site - AWS.

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: * Jerry Barnette date 2-24-03 Installed by: Wayne County

Improvement Permit by: Wesley Sparks R.S. date 2/18/03 Operation Permit by: Wesley Sparks R.S. date 7/15/03

Authorization to Construct by: Wesley Sparks R.S. date 2/18/03 Existing System Inspection by: ____ date ____

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