IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 Paid 10.80 MOORESVILLE 704-664-5281

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

PERMIT# 10482970 PIN# 4648069570 DATE 8-26-2002

OWNER OR CONTRACTOR L. Shaun Ogden PHONE: Business (704) 309-6810 Home

ADDRESS P.O. Box 1281 Davidson, NC 28036

LOCATION Hwy 21 N to Cornelius to Blackbeard Ln on left

SUBDIVISION Pirates Cove BLOCK / SECTION LOT 8 LOT AREA ~.45Acre SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 9/17/02
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4@100'ea Trench Width 36" Max Trench Bottom Depth 36"

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI
System Description: Gravity-25% Reduction
Repair System Description: LD Panel Block
Maintenance Agreement Required: [ ] Yes [X] No Not Initially
Gravel Depth N/A [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

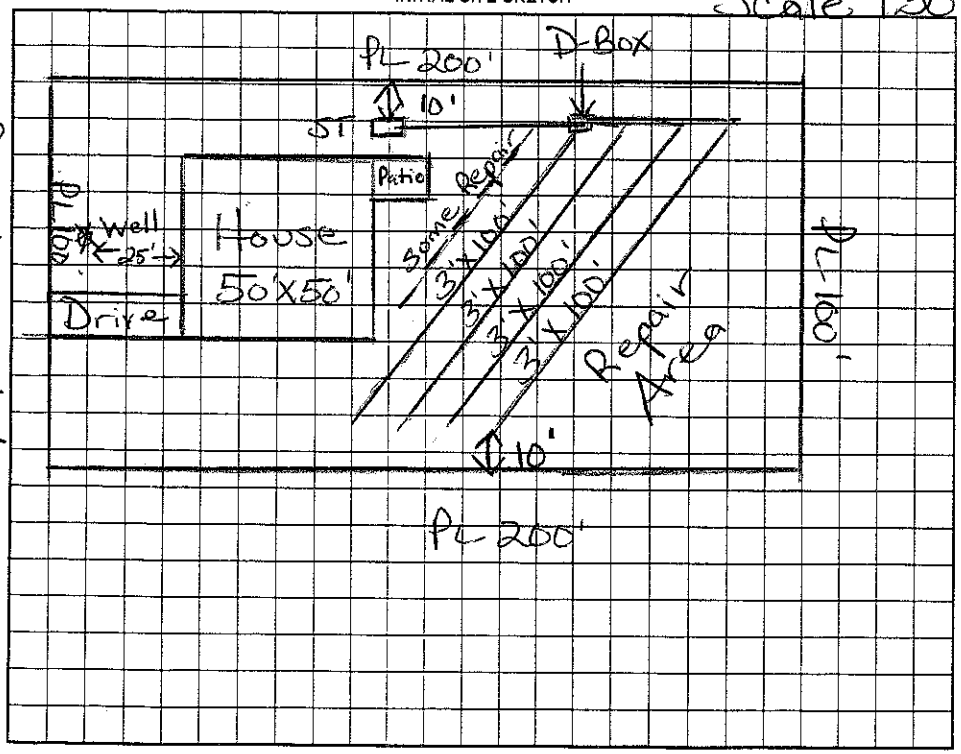
[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Bathrooms 3
[ ] Business No. Employees
[ ] Other

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

Comments/Conditions: Keep Septic System at least 10' from PL & at least 50' from any well

Comments/Conditions: Note: Must keep drainfield tight, 9' On Center
House print Can not exceed What's drawn or Panel Blk drainfield will be needed.

INITIAL SITE SKETCH Scale 1:50



Blackbeard Ln

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: L. Shaun Ogden date 8-28-02 Installed by: Abernathy

Improvement Permit by: Maria H. H. Dobson RS date 8/26/2002 Operation Permit by: [signature] date 9-24-02

Authorization to Construct by: Maria H. H. Dobson RS date 8/26/02 Existing System Inspection by: date

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