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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 145387 PIN# 4648126870.000 DATE 9/19/07

OWNER OR APPLICANT Michael Pickett PHONE: Business 704 928 5809 Home 704 658 92

ADDRESS 175 Carriage Club Dr. Mooresville NC 28117

LOCATION I 77 S to Hwy 150 TR Bluefield TL Big Indian Loop TL Castle Dr. at end of Cul de sac.

SUBDIVISION Indian Forest BLOCK / SECTION 2 LOT 22 LOT AREA 1.85 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. G 3

Septic Tank: 1000 Gallons; STB 794 Date 9/23/07

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No 400' Accepted

Nitrification Field: No Fields 1 Square Feet 1601 Linear Feet 534'

No Lines 4 Trench Width 36" Max Trench Bottom Depth conv. 36" Gravel Depth 12"

☑ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: Conventional or Accepted

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☒ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Persons ____ No. Employees ____

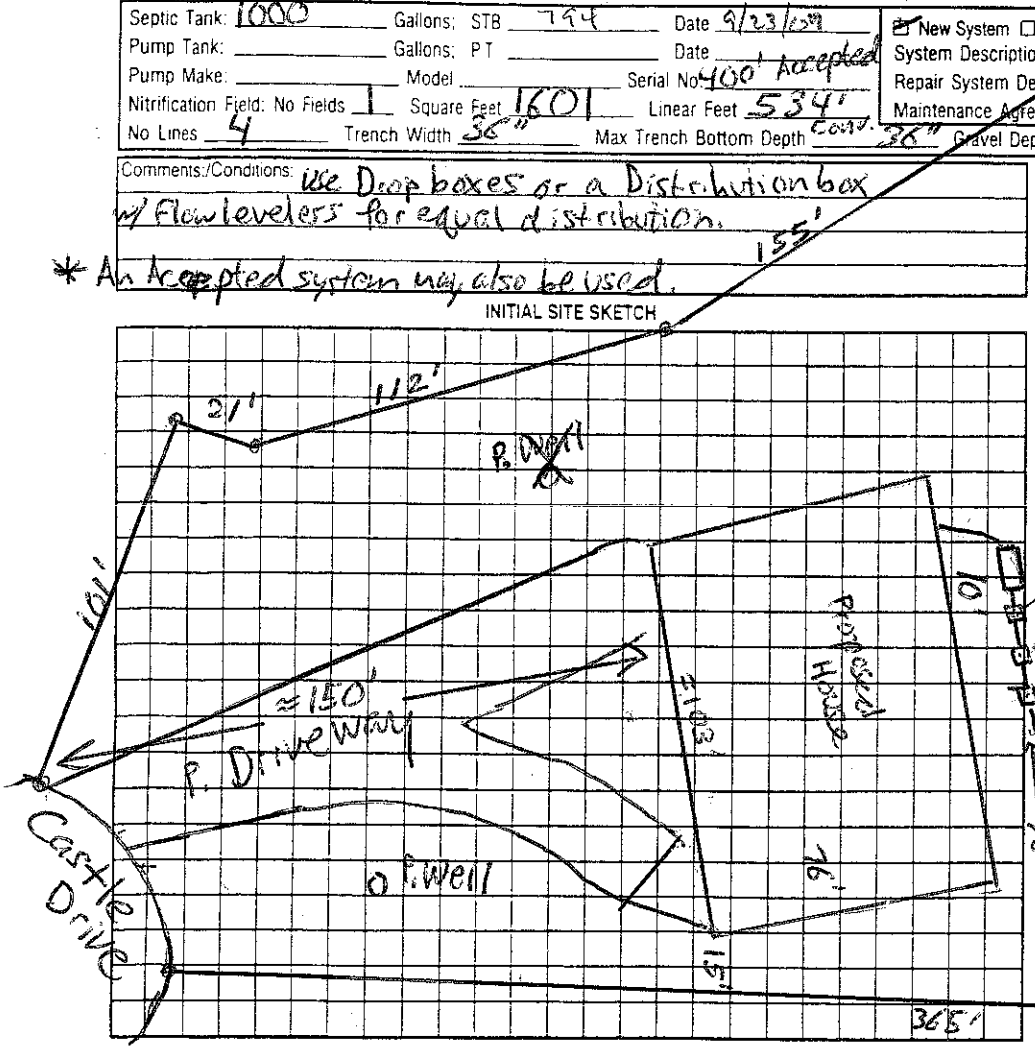
Water Supply: ☑ Individual ☐ Public ☐ Community

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

Comments/Conditions: use Drop boxes or a Distribution box w/ Flow levelers for equal distribution.

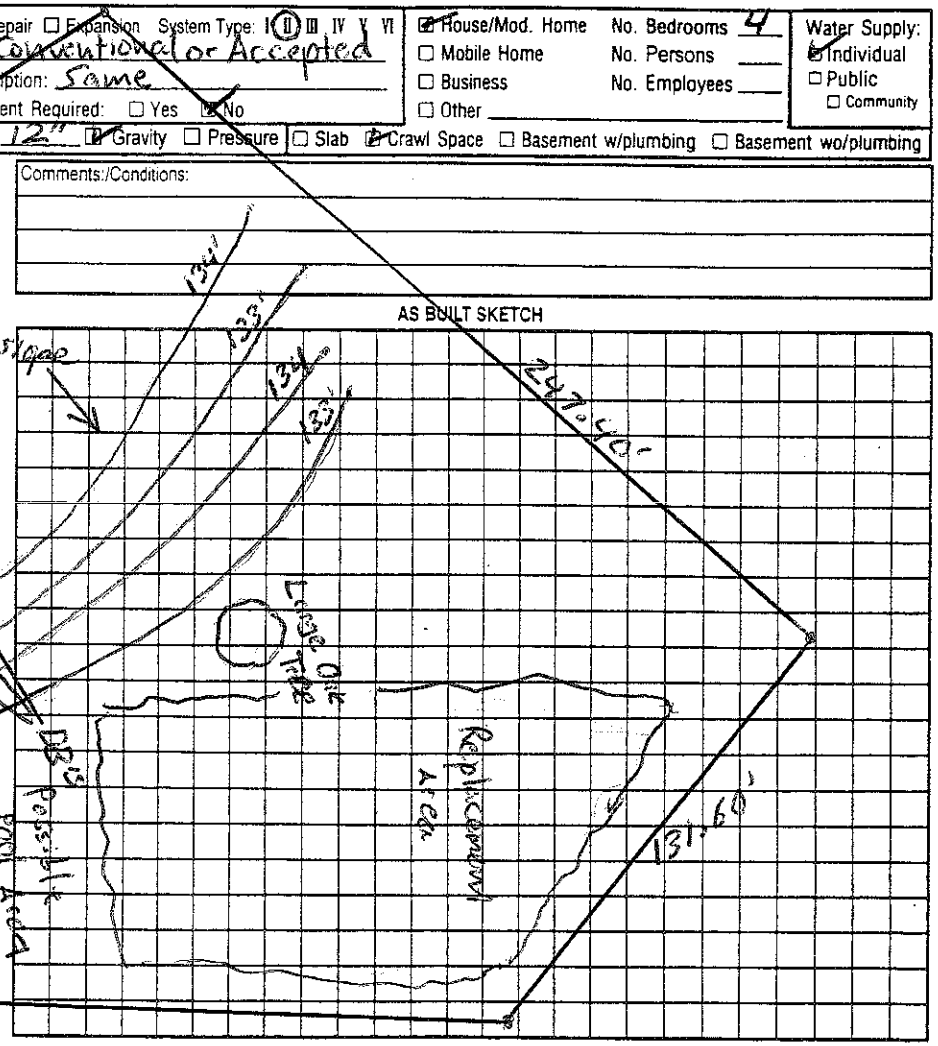
* An Accepted system may also be used.

INITIAL SITE SKETCH



Comments/Conditions:

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: [signature] date 2-21-07

Improvement Permit by: Anthony Cohen Jr. date 9/19/07

Authorization to Construct by: Anthony Cohen Jr. date 9/19/07

Installed by: F.T. Ervin

Operation Permit by: Wesley Sparks RS date 5/21/08

Existing System Inspection by: ____ date ____

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