IRE L COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 375.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 12939 4 PIN# 4648 23 5806 DATE August 29, 05

OWNER OR CONTRACTOR Wood Diversified Service / McCaslin Constr. PHONE: Business _____ Home _____

ADDRESS 8156 Monbo Rd, Catawba N.C. 28609

LOCATION 150 W. TR Bluefield Rd. TR Brushcreek Loop TR Palos Verde Dr. at end

SUBDIVISION Palos Verde BLOCK / SECTION _____ LOT 9 LOT AREA 29,636 ft² SITE CLASS. ts DESIGN FLOW 480gpd L.T.A.R. .3 initial / .25 Repair

Septic Tank: 1000 Gallons; STB 160 Date 12-7-06

Pump Tank: 1000 Gallons; PT 319 Date 1-3-07

Pump Make: Goulds Model WE0311M Serial No. _____

Nitrification Field: No Fields 1 Square Feet 580/870 Linear Feet 290

No Lines 3 (CF) Trench Width 24" min 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, (IV), V, VI

System Description: LPP BPBS

Repair System Description: LPP BPBS

Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other _____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: or = 36" max 9'oc

"Stake off any bumps

Initial site evaluation and Layout performed by Mike Athanas and Cathy Pellum

Comments:/Conditions:

garage house

INITIAL SITE SKETCH

Do not cut for positive drainage

See Plan by Mike Athanas and Cathy Pellum

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 9-28-05 Installed by: Gary Leatherman

Improvement Permit by: _____ date 8-29-05 Operation Permit by: _____ date 4-19-07

Authorization to Construct by: _____ date 9-7-06 Existing System Inspection by: _____ date _____

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