IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 / 130.00 Paid MOORESVILLE 704-664-5281

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

PERMIT# 129395 PIN# 4648 23 6606

OWNER OR CONTRACTOR World Dissestinal Services PHONE: Business _____ Home _____ DATE August 29, 2005

ADDRESS 8156 Monbo Rd Catawba, N.C. 28609

LOCATION 150' W TR Bluefield Rd & Big Cinder Loop TR Palos Verde Dr at end

SUBDIVISION Palos Verde BLOCK / SECTION _____ LOT 10 LOT AREA 21,598 ft² SITE CLASS. B DESIGN FLOW 440gpd L.T.A.R. .03

Septic Tank: 1000 Gallons: STB 1012 Date 10/2/05

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 2 Square Feet _____ Linear Feet 270

No Lines 3+3 Trench Width 24" min 18" Max Trench Bottom Depth 36"

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

System Description: Gravity PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☐ Yes ☒ No Infinity

Gravel Depth N/A ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms ___

☐ Business No. Employees ___

☐ Other _____

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions:

@ 36" max 18" cc

"Stump off" any old burns

Initial site evaluation and layout performed by Mike Athanas, LSS and Ashley Roberts, LSS.

Comments:/Conditions:

INITIAL SITE SKETCH

SEE Plan by Mike Athanas & Ashley Roberts

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

Improvement Permit by: _____ RS date 8-29-05

Authorization to Construct by: _____ RS date 12-20-05

Installed by: Tommy Frye

Operation Permit by: _____ RS date 5/15/06

Existing System Inspection by: _____ date _____

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