IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 34523 PIN# 4649 04 9494.016 4649 14 2917 DATE October 17, 2006

OWNER OR APPLICANT Orchard Farms LLC / PRIDE HOMES PHONE: Business _____ Home _____

ADDRESS 227 Hideaway Lane, Mooresville, N.C. 28117

LOCATION Perth Rd (N) past Pilkey Rd. to Wild Cherry W. to Orchard Farm Lane 6th lot on Right

SUBDIVISION The Orchard BLOCK / SECTION _____ LOT 16 LOT AREA 29529 ft² SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .03

Septic Tank: 1000 Gallons: STB 2583 Date 2/12/07
Pump Tank: 1000 Gallons: PT 17 Date 4/24/07
Pump Make: Goulds Model WE0712H Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 * Linear Feet 300 *
No. Lines 3 Trench Width 36" * Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI
System Description: 1PPPBPS
Repair System Description: 1PPPBPS
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons ____
☐ Business No. Employees ____
☐ Other _____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions:
* PER PLAN Specs

Comments:/Conditions:
9/18/07 Checked tanks & lines - WS
9/20/07 Pressure Select Checked
9/21/07 Alarm Checked

INITIAL SITE SKETCH

SEE PLAN From Rollins Soil & Env. Services

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 10-26-06 Installed by: C+S

Improvement Permit by: _____ date 10-17-06 Operation Permit by: _____ RS date 10/5/07

Authorization to Construct by: _____ RS date 4/11/07 Existing System Inspection by: _____ date _____

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