700.00 Paid 4:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 104130 PIN# 4649750187 Cell Office DATE 11-1-05

OWNER OR APPLICANT Full Spectrum Homes PHONE: Business 746-5312 ~~Home~~ 528-3597

ADDRESS P.O. Box 1649 Troutman, NC 28166

LOCATION Hwy 21 North TL Flowerhouse TL Rankinhill on right at intersection w/ Ty-Lin

SUBDIVISION Magic Forest BLOCK / SECTION ____ LOT 5&16 LOT AREA .74 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .525

Septic Tank: 1000 Gallons; STB 1012 Date 5-22-05

Pump Tank: ~~1000~~ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360'

No Lines 4 @ 90' 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: Pump-25% Reduction

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Persons ____ No. Employees ____

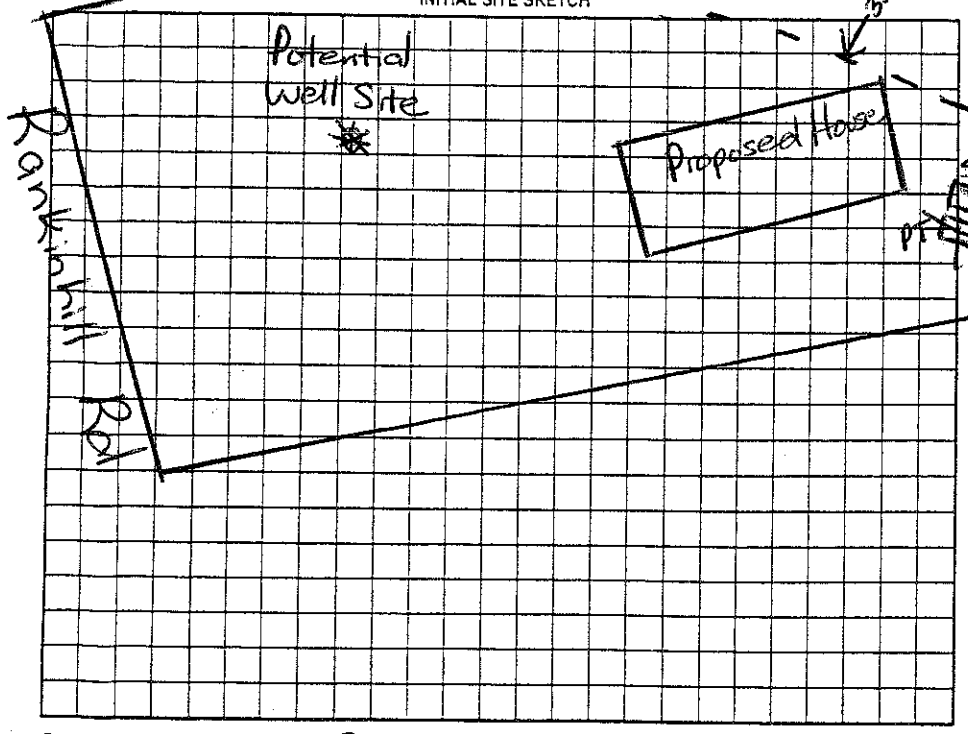
Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments/Conditions: Scale 1:50

Ty-Lin

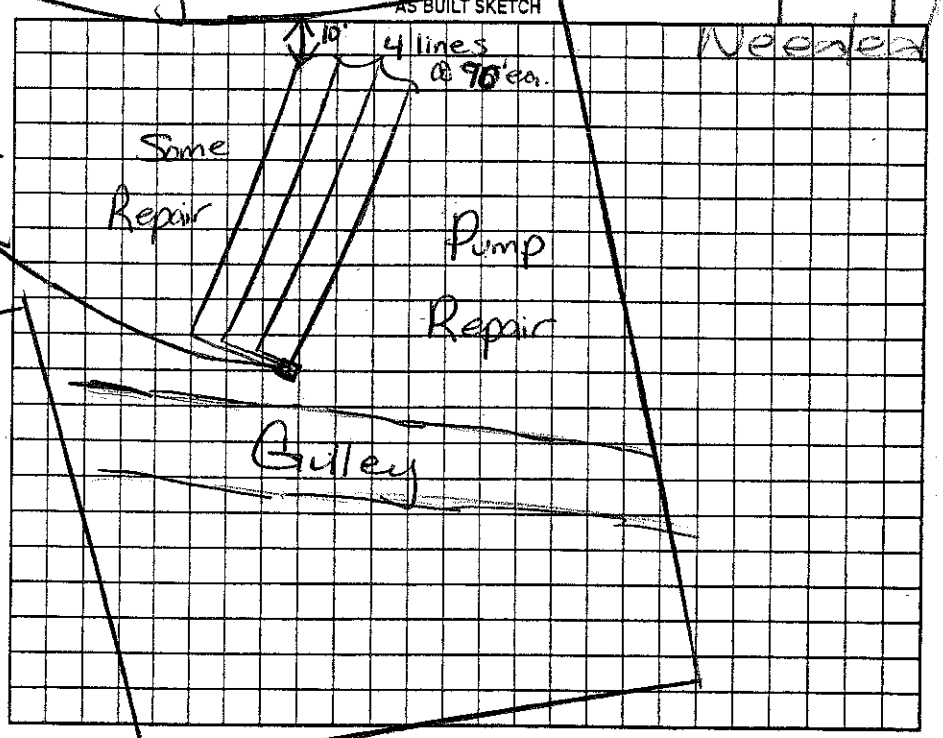
INITIAL SITE SKETCH



Comments/Conditions: Installed Quick 4 Granular Feed No Pump Needed

Ty-Lin

AS BUILT SKETCH



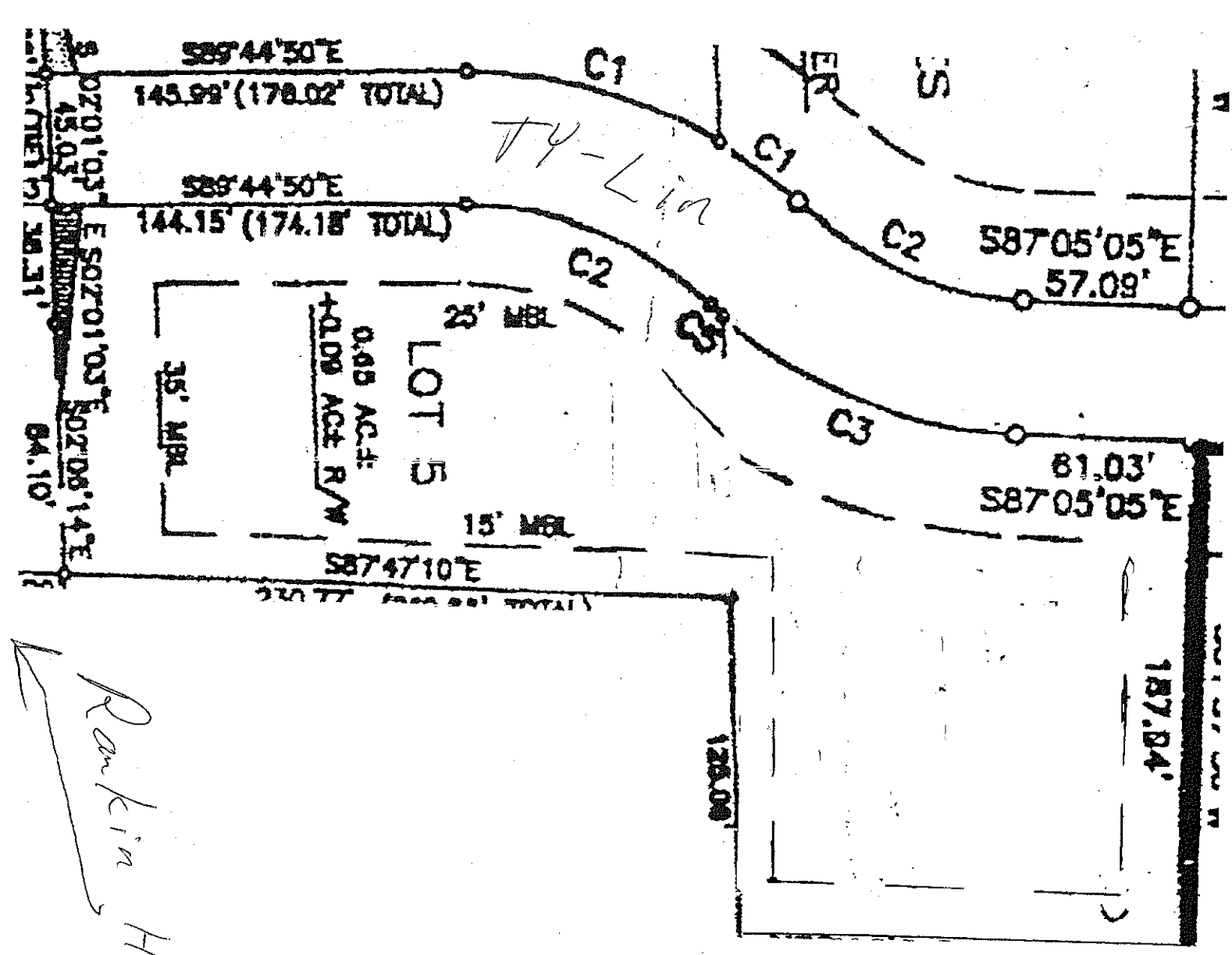
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. ☐ Improvement Permit with site plan 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 11/3/05 Installed by: Craig Thompson RS

Improvement Permit by: Maria H. Dotson RS date 11/1/05 Operation Permit by: Maria H. Dotson date 12/14/05

Authorization to Construct by: Maria H. Dotson RS date 11/1/05 Existing System Inspection by: ____ date ____

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



Lot #5 & 16 in Magic Forest

IREDELL COUNTY HEALTH DEPARTMENT

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

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

700.00 Paid 4:00

PERMIT# 104130 PIN# 4649750187

OWNER OR APPLICANT Full Spectrum Homes Cell

ADDRESS P.O. Box 1649 Troutman, NC 28166 PHONE: Business 746-5312 Office DATE 11-1-05

LOCATION Hwy 21 North TL Flowerhouse TL Rankinhill on right at intersection w/ Ty-Lin Home 528-3597

SUBDIVISION Magic Forest BLOCK / SECTION LOT 5&16 LOT AREA .74 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .525

Septic Tank: 1000 Gallons: STB 1012 Date 5-22-05

Pump Tank: ~~1000~~ Gallons: PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360'

No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I II (III) IV V VI

System Description: Pump-25% Reduction

Repair System Description: Same

Maintenance Agreement Required: [ ] Yes [X] No

[X] Gravity [X] Pressure [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

[X] House/Mod. Home [X] Mobile Home [ ] Business [ ] Other

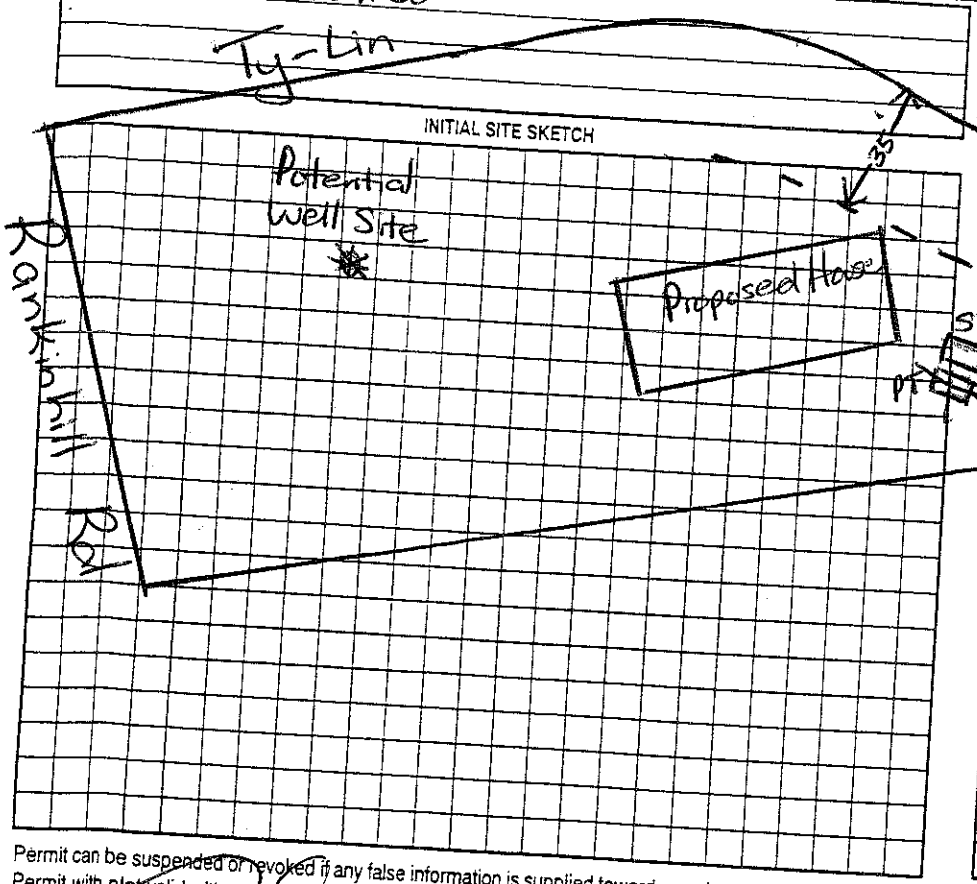
No. Bedrooms 3 No. Persons No. Employees

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

Comments:/Conditions: Scale 1:50

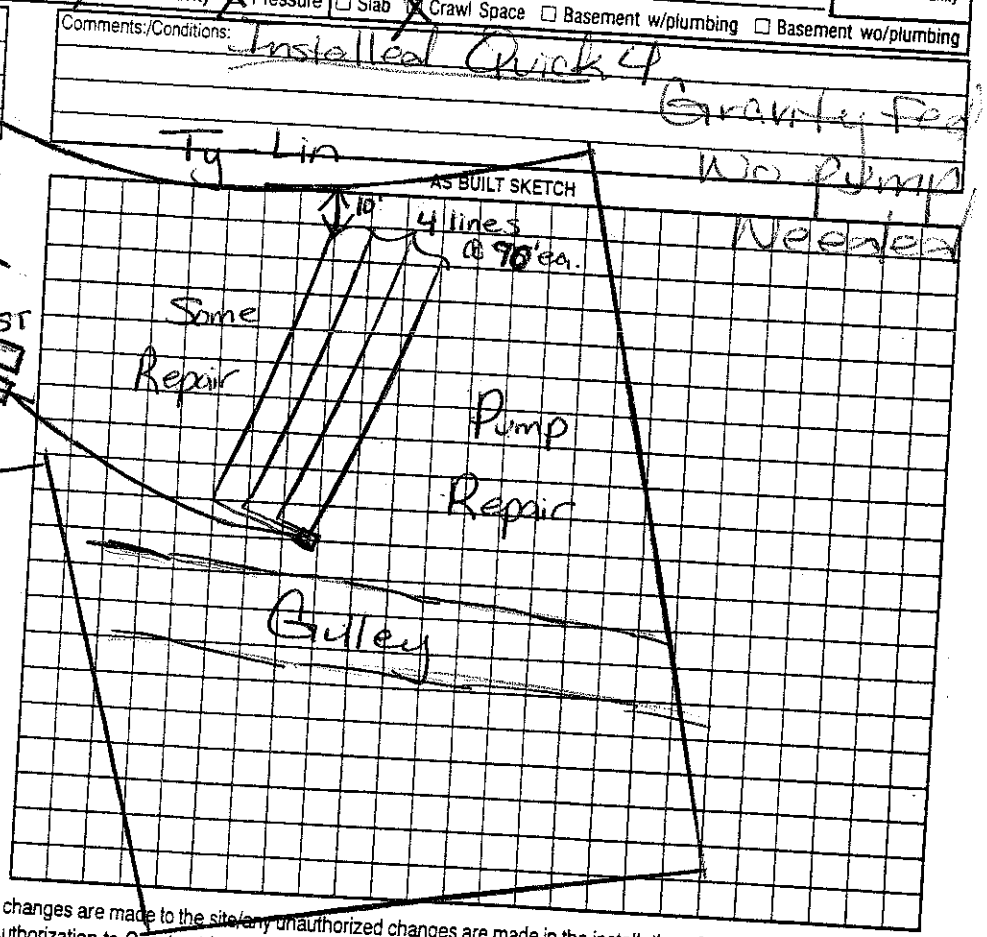
Ty-Lin

INITIAL SITE SKETCH



Comments:/Conditions: Installed Quick 4 Gravity Pressure W/o Pump Needed

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:

Improvement Permit by: Maria H. Dotson RS. date 11/3/05

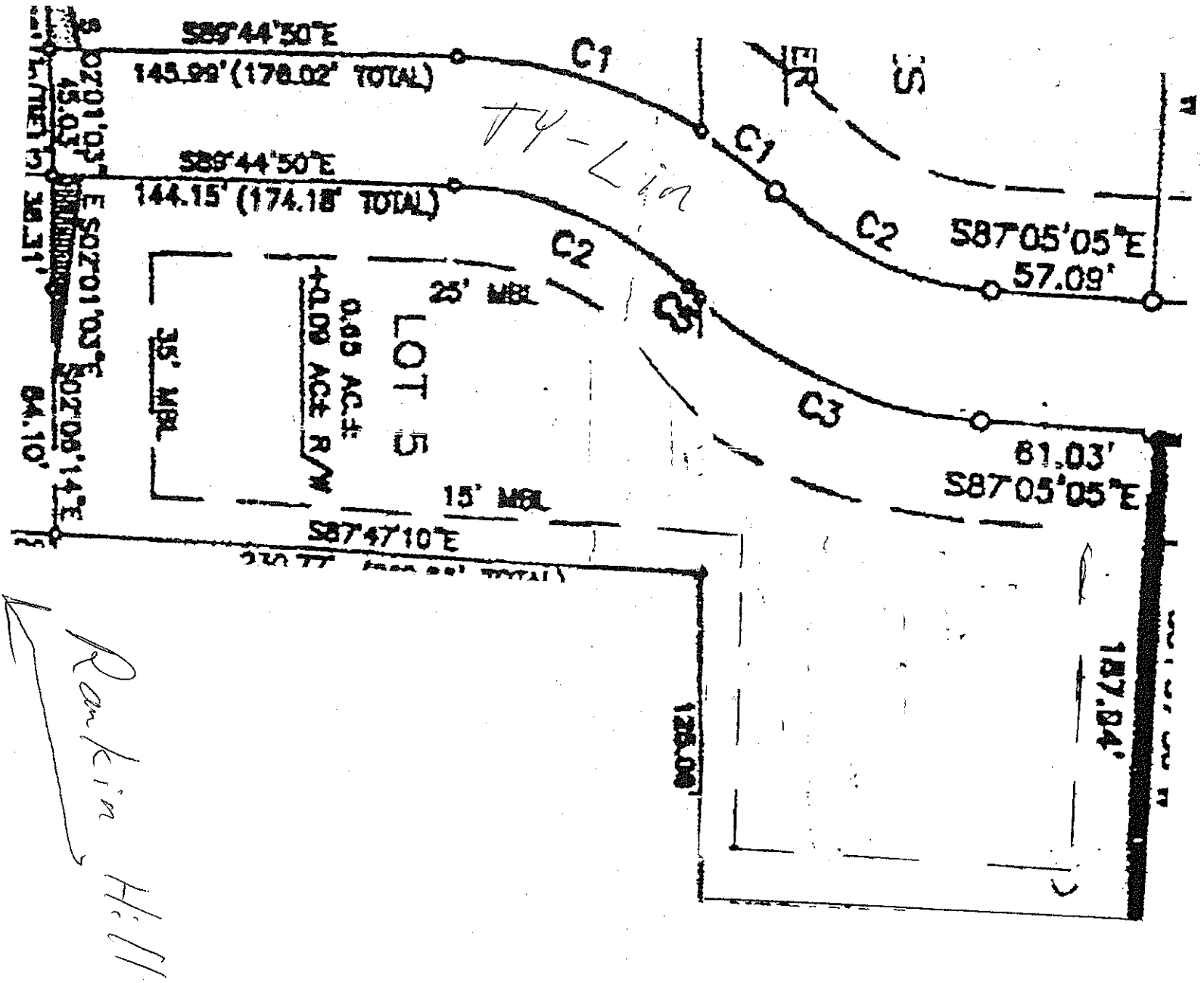
Authorization to Construct by: Maria H. Dotson RS date 11/1/05

Installed by: Craig Thompson RS

Operation Permit by: Maria H. Dotson date 12/14/05

Existing System Inspection by: date

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



Lot #5 & 16 in Magic Forest