Book 828 403-4600 10:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14534 PIN# 4649857847.000 4649-85-7847 DATE 11/28/07

OWNER OR APPLICANT LPD Windward LLC PHONE: Business 704 400-7019 Home 704 731-0150

ADDRESS 110 W. Fayetto St. Suite 900

LOCATION 21/115 N TL on Sailwinds Rd. on L at end of road 305 Sailwinds Rd.

SUBDIVISION Windward Point BLOCK / SECTION 2 LOT 109 LOT AREA 1.05ac SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .03

Septic Tank: 1000 Gallons: STB 786 Date 2-2-08
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300'
No Lines 6 Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: Gravity 25% Reduction
Repair System Description Gravity 50% Reduction
Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons ____ No. Employees ____

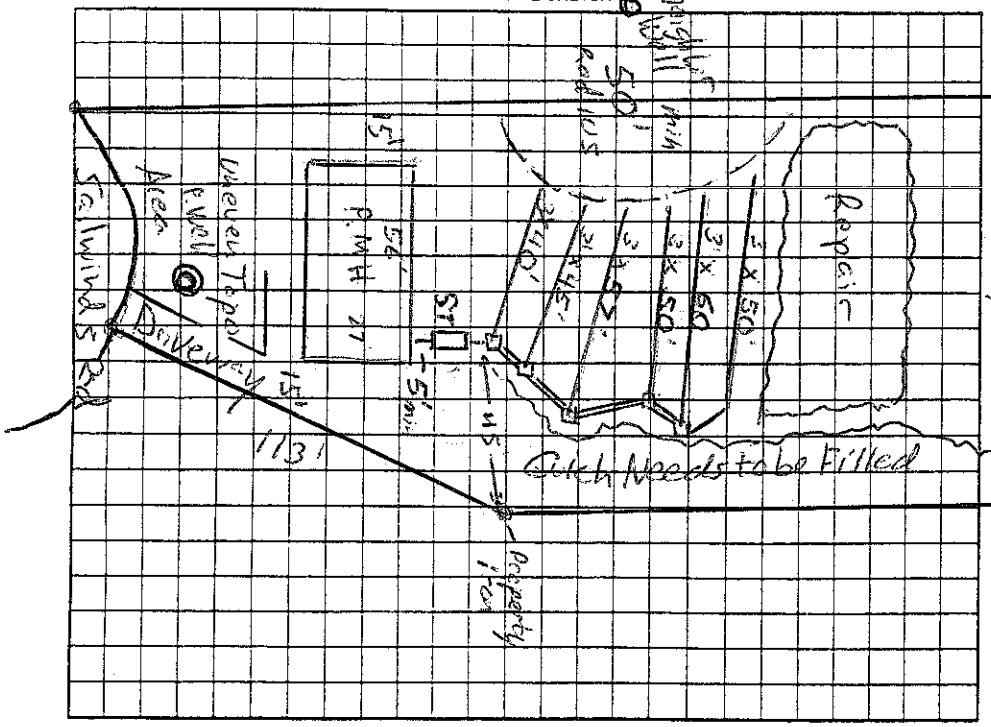
Water Supply: ☑ Individual ☐ Public ☐ Community

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

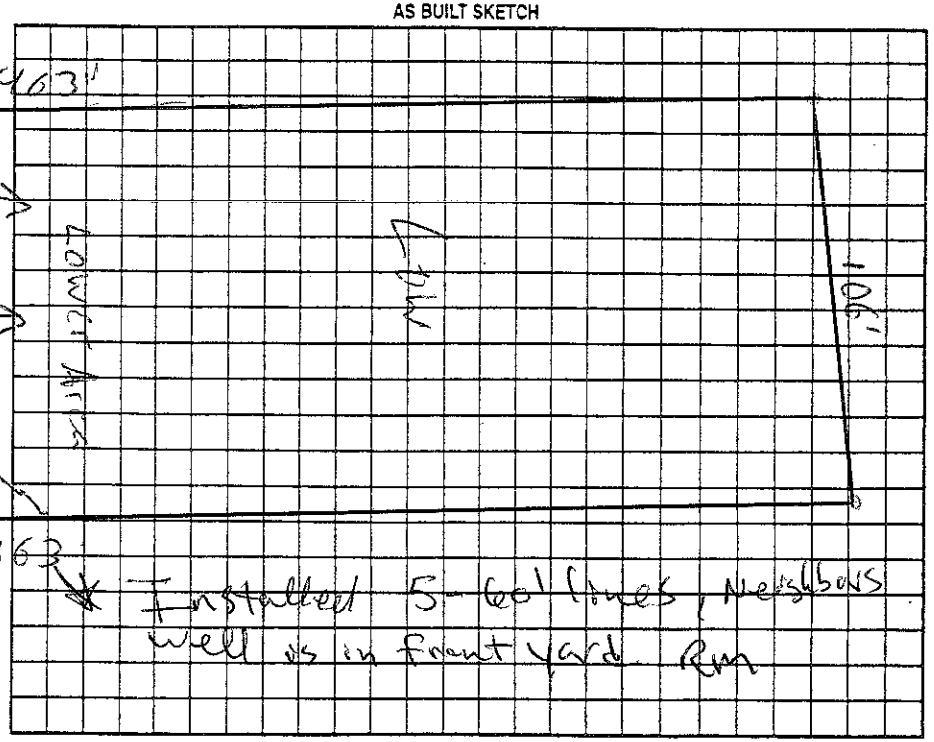
Comments:/Conditions: *Guiches need to be filled in (Do not install in Guich) or Fill
* Maintain 28" max depth
* Need to serial Distribute using drop boxes if necessary

Comments:/Conditions: 2/20/08 Plans essentially same as IP. ac
Blue Filter

INITIAL SITE SKETCH



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 12/5/07 Installed by: Bucks Grading

Improvement Permit by: Anthony Cohen Jr. date 11/28/07 Operation Permit by: Rm date 6-11-08

Authorization to Construct by: Anthony Cohen Jr. date 2/20/08 Existing System Inspection by: _____ date _____

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