11:00

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 145533 PIN# 4655303406 DATE 3-3-08

OWNER OR APPLICANT Burt Ward's Homes of Distinction PHONE: Business _____ Home 704 948-0173

ADDRESS 14452 Laurel Tree Ln Huntersville NC 28078

LOCATION Hwy 115 S TL Faith Rd TR Midway Lake TR Monarch on right

SUBDIVISION Davidson Creek BLOCK / SECTION _____ LOT 8 LOT AREA .8 Acre SITE CLASS PS DESIGN FLOW 480gpd J.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 5-24-05

Pump Tank: 1000 Gallons: PT 17 Date 10-19-07

Pump Make Goulds Model WE05124HH Serial No J087755

1/2 HP

Nitrification Field: No Fields 1 Square Feet 544 Linear Feet 272

No Lines 5 Trench Width 24" min Max Trench Bottom Depth 30-36" Gravel Depth N/A ☐ Gravity ☒ Pressure

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

System Description: Pump-Up Panel BPK

Repair System Description: Same

Maintenance Agreement Required: ☒ Yes ☐ No

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

No. Bedrooms 4 No. Persons ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

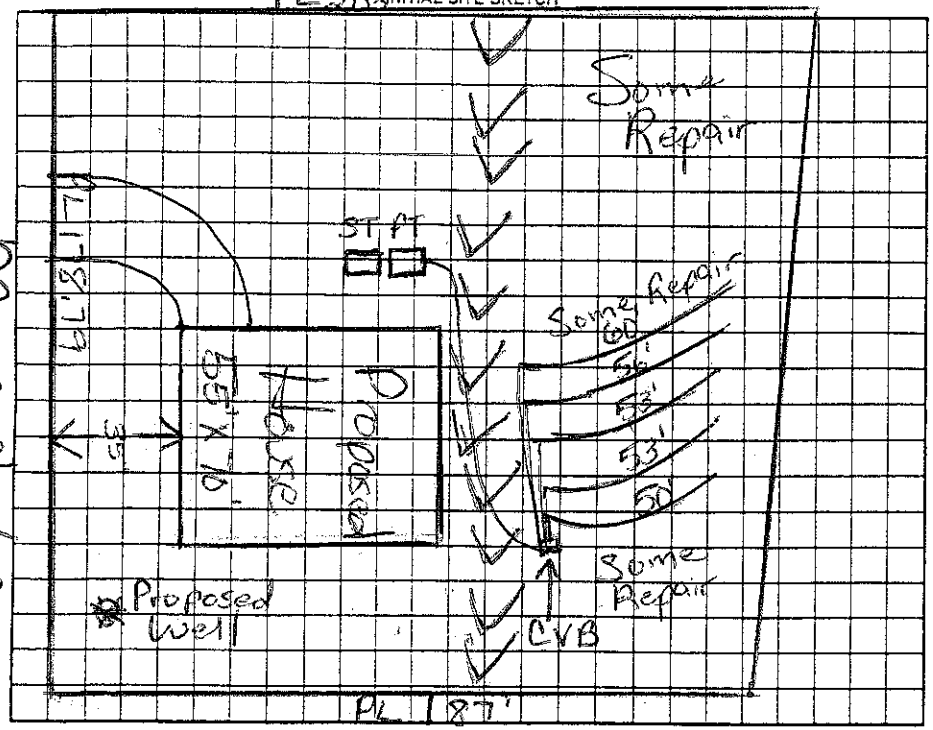
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: See attached report by Michael Athanas Environmental Assoc. for Specs. on design

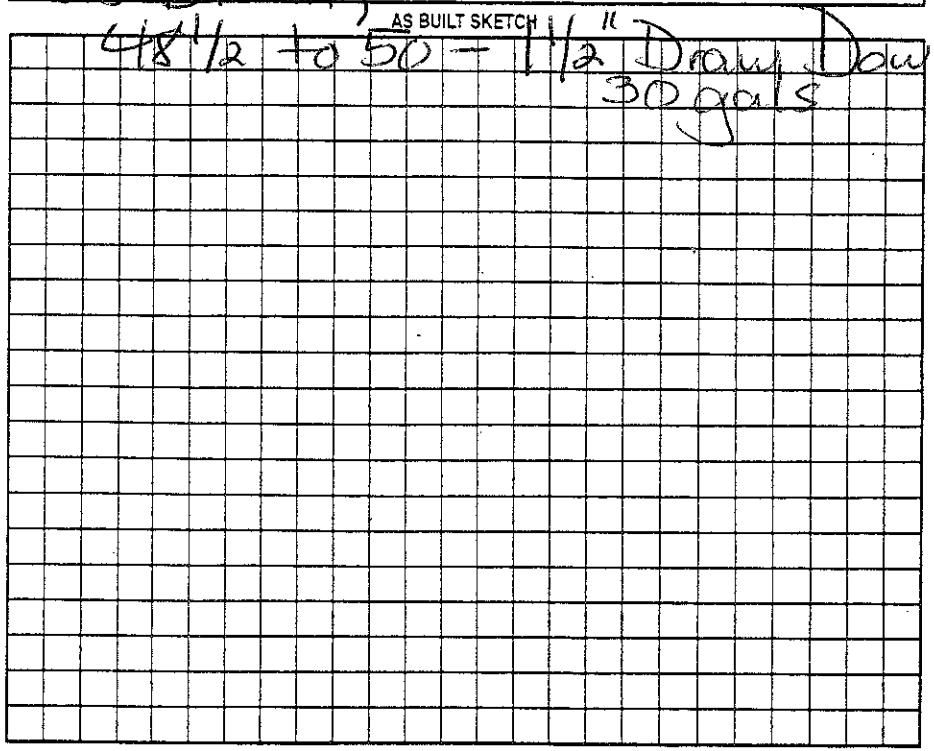
Scale 1:50

Comments:/Conditions: Use "Inline" filter on PT
5/32" hole drilled
10/30/08 Checked tanks & lines (installed As Drawn)

PL 20' 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: Burton E Ward date 3/16/08

Improvement Permit by: Maria H Dotson RS date 3/3/08

Authorization to Construct by: Maria H Dotson RS date 3/3/08

Installed by: Steve Jordan RS

Operation Permit by: Maria H Dotson RS date 12/18/08

Existing System Inspection by: _____ date _____

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