Brad Warren 980 721-23

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE [illegible] MOORESVILLE 704-664-5281

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

PERMIT# 118454 PIN# ~~4658055128.065~~ Mike Watt (704) 996-4542 DATE 2-17-04

OWNER OR CONTRACTOR New - Watt Homes Inc PHONE: Business (704) 663-2252 Home PIN# 4658-05-6107

ADDRESS 720 Shearers Rd Mooresville, NC 28115

LOCATION US 21 North TL Cornelius Rd ~ 2 miles TR Olympia Dr. TR Ariel Dr. 7th lot on right

SUBDIVISION Cornelius Est BLOCK / SECTION ____ LOT 65 LOT AREA .6 Acre SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 3-29-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 900' Linear Feet 300'
No Lines ~~4~~ 5 Trench Width 36" Max Trench Bottom Depth 18"-36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - 25% Reduction
Repair System Description: 25% Reduction on Panel Blk
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

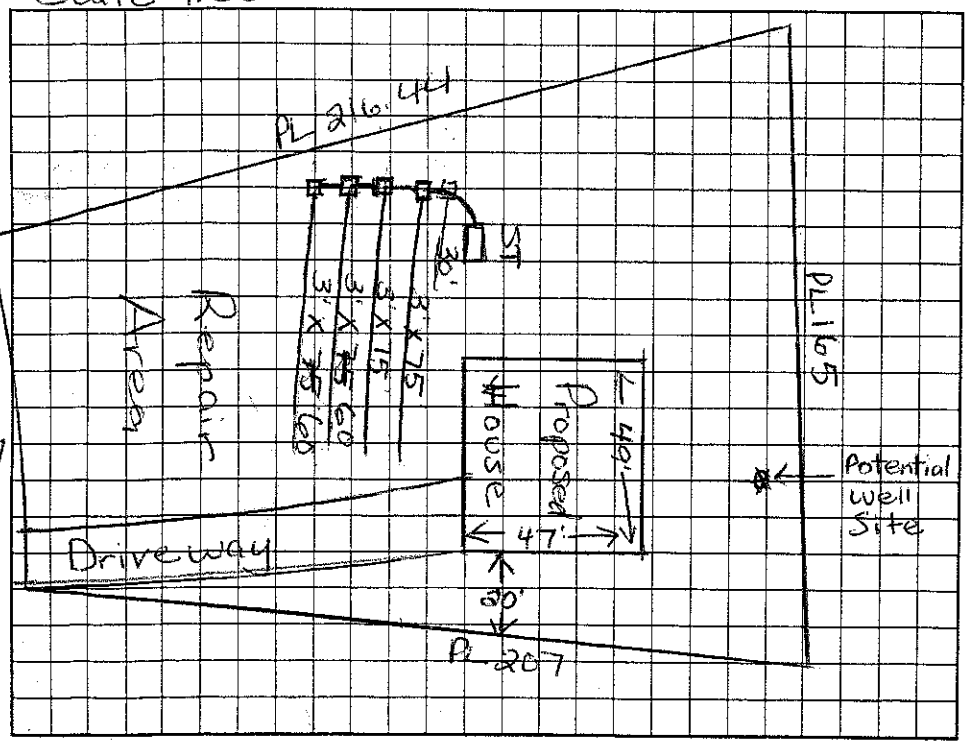
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Keep Septic System at least 10' from PL & 100' from well
★ Changed to 5 lines (1-30', 2-75' & 2-60'

Comments/Conditions: ★ Note: Shallow Soils at site, hit Saprolite at 30". IF trench bottom exceeds 18" then Septic System Must be 100' from any well

Scale 1:50

INITIAL SITE SKETCH



AS BUILT SKETCH

6/24/04 Checked tank & top 3 lines
>100' to well

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: Michael Watt date 2/19/04 Installed by: Brad Warren

Improvement Permit by: Maria H. Dotson RS date 2/17/04 Operation Permit by: C. [illegible] RS date 6/25/04

Authorization to Construct by: Maria H. Dotson RS date 2/17/04 Existing System Inspection by: ____ date ____

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