Site Address: 123 Clear Springs Rd; Mocksville

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 143934 218508 PIN# ~~4659157617.019~~ 4659-16-6078 DATE 8-28-07

OWNER OR APPLICANT E & J Development Co. PHONE: Business 704-201-6465 Home

ADDRESS P.O. Box 1065 Huntersville NC 28070

LOCATION Hwy 115 N TL Clear Springs on left

SUBDIVISION Autumn Grove BLOCK / SECTION -2- LOT 19 LOT AREA .63Ac SITE CLASS PS DESIGN FLOW 480gpd L.T.A.R. .3 gpa/ft²

Septic Tank: 1000 Gallons: STB 160 Date 4/11/16

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1260 Linear Feet 420 (401)

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: 2590 reduction gravity

Repair System Description: LP PPBPS - Pressure

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth NA ☒ Gravity ☐ Pressure

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

No. Bedrooms 4 No. Persons 8 No. Employees

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments:/Conditions:

System 100' from well required
Shave terraces

Comments:/Conditions:

INITIAL SITE SKETCH

See plan from Rollans Soil & Environmental Services

AC Requirements

* Tank will need to be repositioned to parallel the back of house.
* Tank must maintain greatest feasible distance from any drainage swale/water diversion but no less than 15 ft.
* Drainage swale for for house must be as close as possible to house and patio as possible.

AS BUILT SKETCH

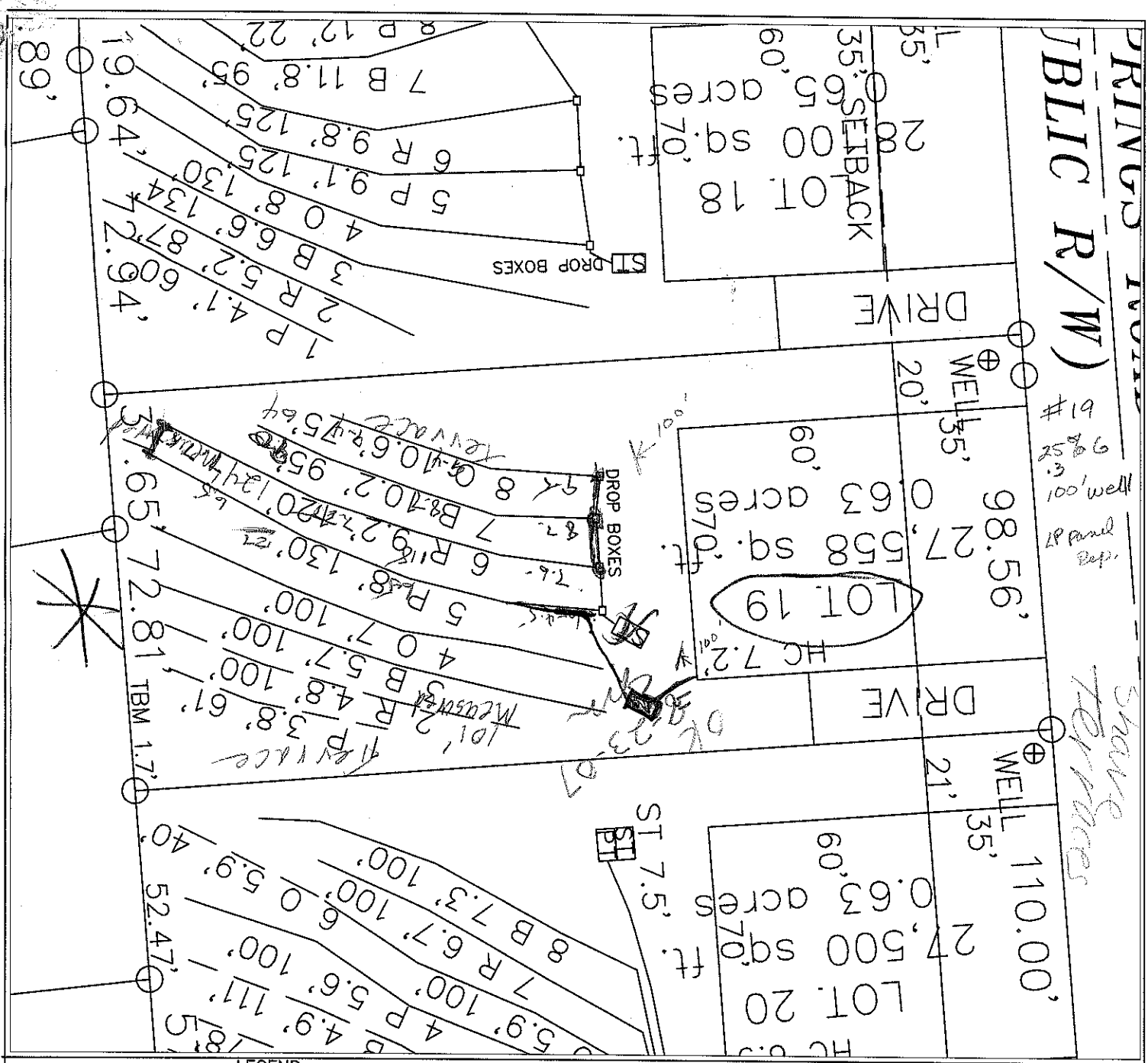
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan 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 4-24-07 Installed by: Water Management of NC

Improvement Permit by: _____ date 8-28-07 Operation Permit by: _____ date 8/18/16

Authorization to Construct by: _____ date 6-10-16 Existing System Inspection by: _____ date _____

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



LEGEND

- House Box.
- System lines.
- Repair lines.
- House Corner Shot.
- T.B.M.

GRAPHIC SCALE
1" = 40'

40 0 40 80

FOR PRELIMINARY PLANNING PURPOSES ONLY. ALL LOTS WILL REQUIRE FINAL APPROVAL BY THE COUNTY HEALTH DEPARTMENT ON A LOT BY LOT BASIS. THIS MAP SHOULD BY USED AS A GENERAL GUIDE, SOME ADJUSTMENTS WILL BE NECESSARY IN THE FIELD DUE TO SOIL VARIABILITY AND COMPLEX TOPOGRAPHIC FEATURES. THIS MAP ONLY REFLECTS EXISTING SOIL SUITABILITY FOR ON-SITE SEPTIC TANK SYSTEMS.

PLEASE REFER TO ATTACHED SOIL REPORT FOR ADDITIONAL SITE SPECIFIC INFORMATION

ROLLANS SOIL & ENVIRONMENTAL SERVICES
2120 GRAHAM ROAD
MOUNT ULLA, NC 28125
PHONE/FAX: (704) 278 - 0989
ASHLEY ROLLANS, NC LICENSED SOIL SCIENTIST
MOBILE: (704) 746 - 5046
EMAIL: ROLLANSFORTC@AOL.COM

MAP TITLE: SITE PLAN & DRAINFIELD AREAS

PROJECT NAME: Orchard Farms LLC/ AUTUMN GROVE

LOCATION/DATE: FERNHILL, BULLFINCH RD IREDELL COUNTY, NORTH CAROLINA FEBRUARY 2007

JOB # : 01-1043
FILE: C:\JOBS\01-1043
PROJECT MGR.: C.B.F.
FIELD WORK: C.B.F. & A.L.P.
DRAWN BY: C.B.F.