Site Address: 119 Clear Springs Rd.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 14393S 2/4022 PIN# 4659-15-7617.020 16-8009 DATE 8-28-07

OWNER OR APPLICANT E+J Development Co / Essex Homes 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 20 LOT AREA .63Ac SITE CLASS. PS DESIGN FLOW 480 gpd L.T.A.R. .3 gpd/ft2

Septic Tank: 1000 Gallons: STB 160 Date 2-18-16
Pump Tank: 1000 Gallons: PT 319 Date 2-23-16
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I II ◐ IV V VI
System Description: 2590 reduction pm
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Persons 8
☐ Business No. Employees
☐ Other

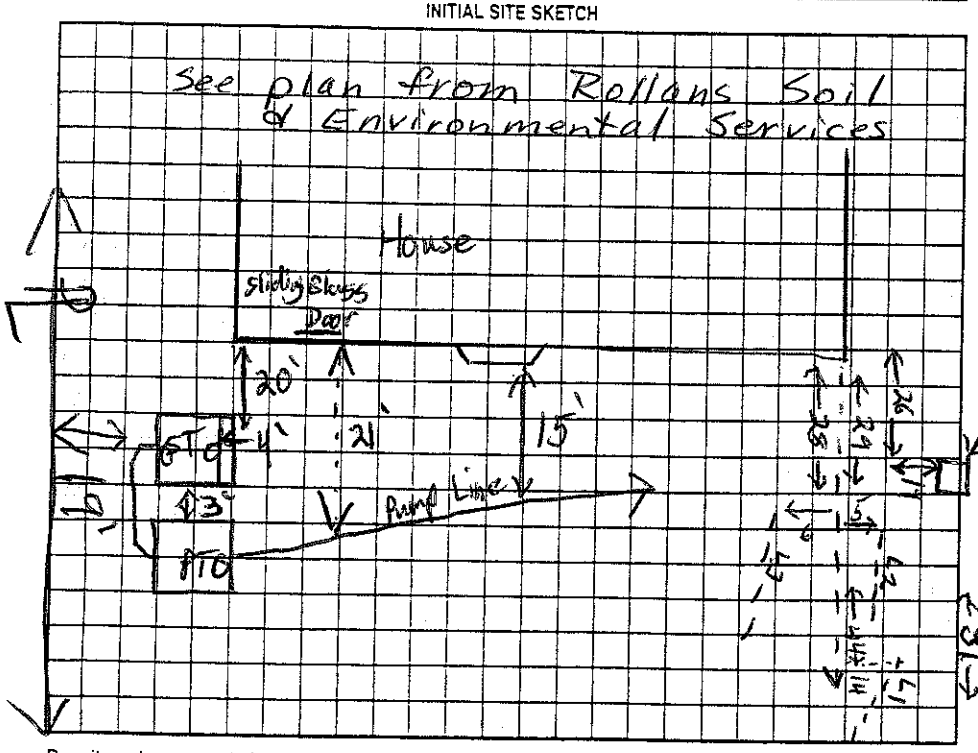
Water Supply: ☒ Individual ☐ Public ☐ Community

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

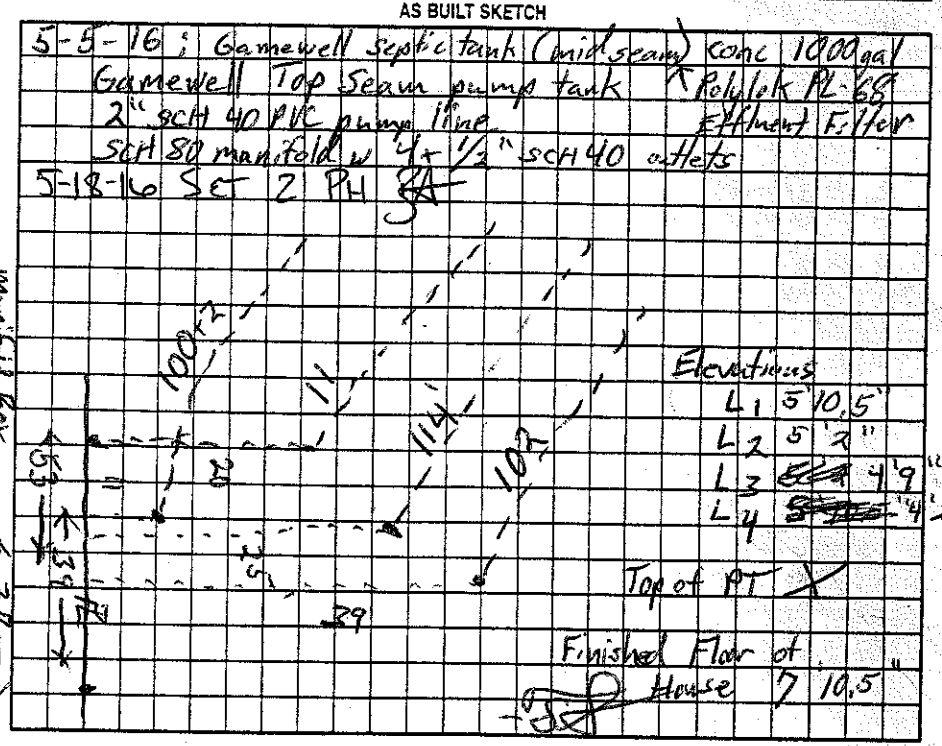
Comments/Conditions: 10/12/15 Reviewed Floor plans, in Compliance with Septic plan.

Comments/Conditions: CHECKED ELEC/ALARM RA 6-21-16

INITIAL SITE SKETCH



AS BUILT SKETCH



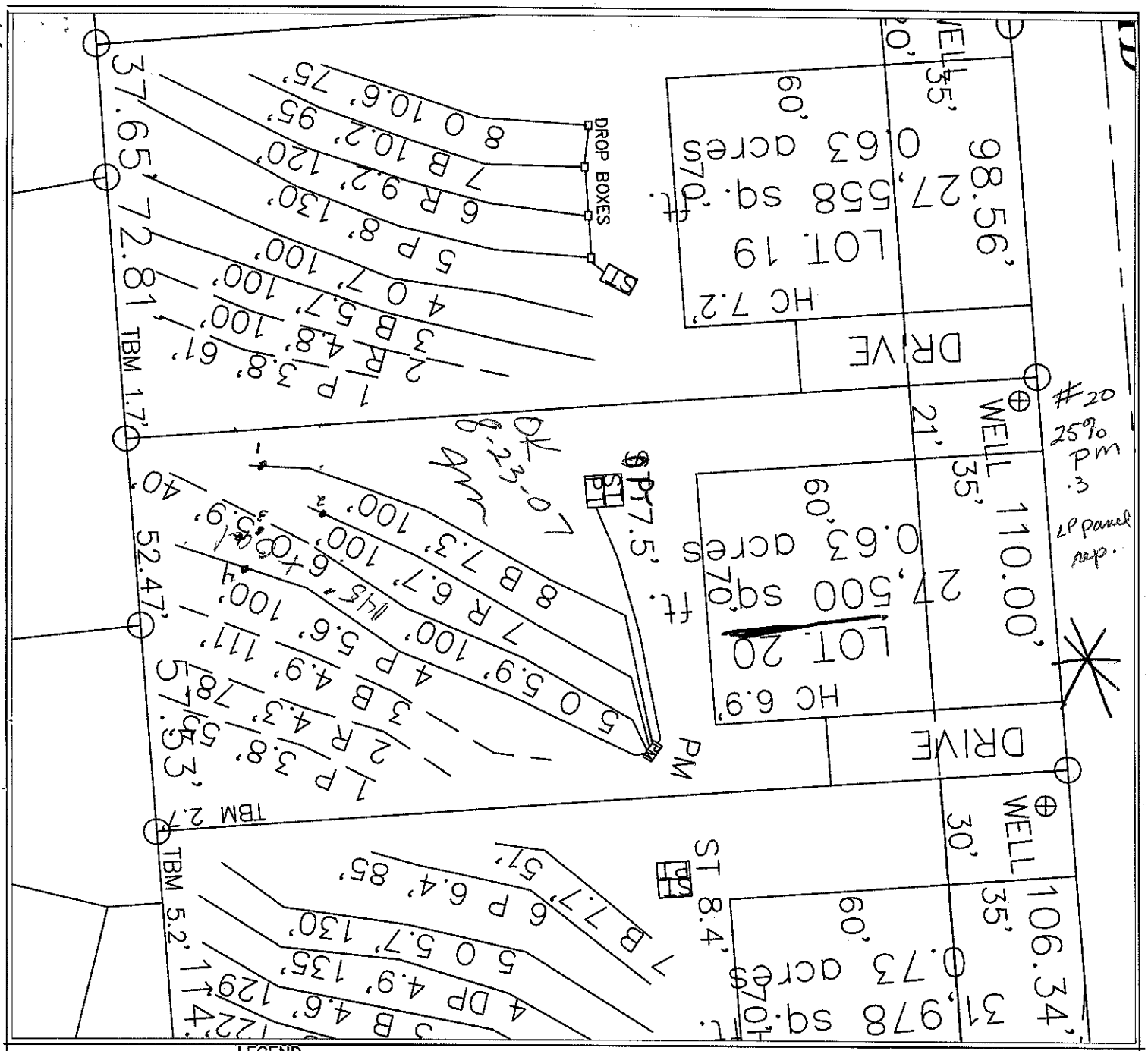
Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration ☐ Improvement Permit with site plan 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 9-24-07 Installed by: Sid Gaskins

Improvement Permit by: _____ date 8-28-07 Operation Permit by: RA 108 date APPROVED JUN 21 2016

Authorization to Construct by: _____ BS date 10/12/15 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 RIDELL 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.