IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 129740 PIN# ~~4659874296.001~~ 4659873212 DATE Feb-8-08

OWNER OR APPLICANT Shepherds Bluff PHONE: Business 704-664-7029 Home

ADDRESS 111-B Raceway Dr. Mooresville NC 28117

LOCATION 1st lot on Right

SUBDIVISION Shepherds Bluff BLOCK / SECTION — LOT 1 LOT AREA .53 Ac. SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .4

Septic Tank: [redacted] Gallons: STB Date

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet 270' Linear Feet 90'

No Lines 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth — ☒ Gravity ☐ Pressure

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

System Description: Gravity 25% Red

Repair System Description: 3 Bdrm PPBPS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons

☐ Business No. Employees

☐ Other

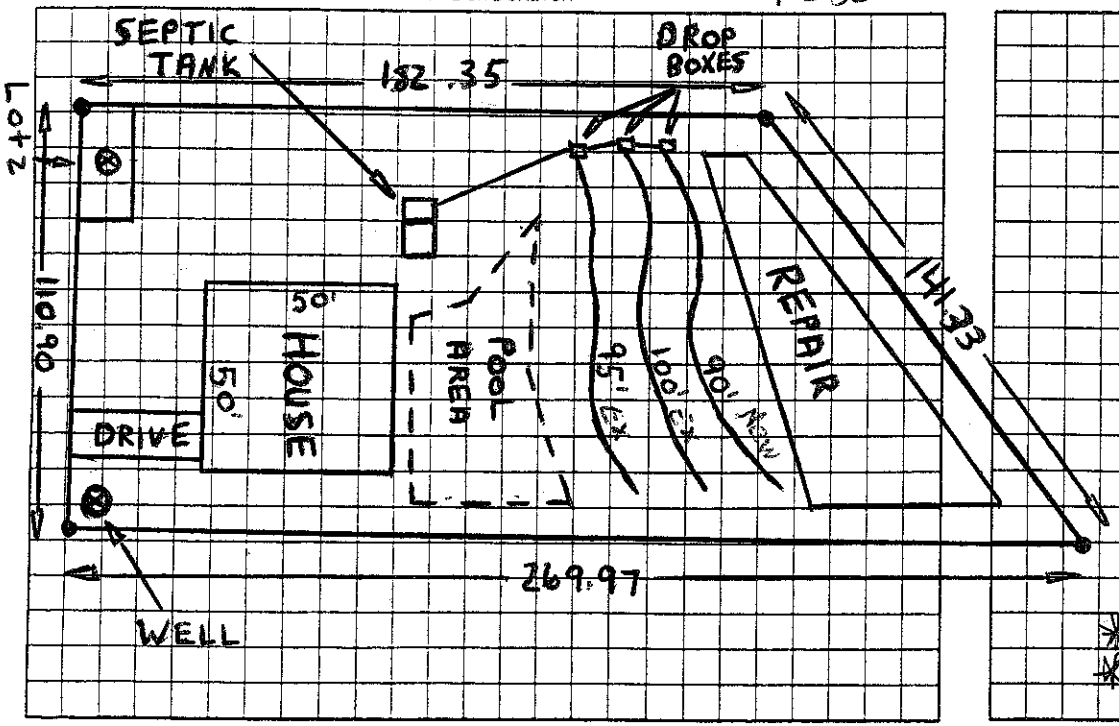
Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments/Conditions: Remove drain line closest to house and install below the last ditch / May reuse chambers & drop box if not damaged

Comments/Conditions: Fill in old drain line / New line = 90' / Keep drop box & drain line 10' from prop line / Keep Pool 15' from Septic Tank & Drain field

INITIAL SITE SKETCH 1" = 50'



AS BUILT SKETCH

-Sean Pennington wanted to complete BIS Final, his name is not on Installer list. Spoke to Connie Stevens who said he was not currently registered. I told Jennifer Pennington to call when they straighten out this problem. AC 2/25/08

* SEE ATTACHED NOTE From Mr. Doug Coker
* OP NEVER ISSUED AZP

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 2/14/08 Installed by:

Improvement Permit by: date Feb-8-08 Operation Permit by: date

Authorization to Construct by: date Feb-8-08 Existing System Inspection by: date

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

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 129740 PIN# ~~4659874296.001~~ 4659873212 DATE 10-3-05

OWNER OR CONTRACTOR Shepherds Bluff PHONE: Business (704) 664-7029 Home

ADDRESS 111-B Raceway Dr Mooresville, NC 28117

LOCATION Hwy 115/21 North TR Shepherd Rd TL Shepherd's Bluff, 1st lot on right

SUBDIVISION Shepherd's Bluff BLOCK / SECTION LOT 1 LOT AREA .53 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .4

Septic Tank: 1000 Gallons; STB 794 Date 10/06/06

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36"* Gravel Depth N/A

X New System ☐ Repair System Type: I, II, III, IV, V, VI (I)

System Description Gravity-Conv. "Accepted Syst

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes X No

X House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

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

Water Supply: X Individual ☐ Public ☐ Community

Comments:/Conditions: * Need to install Drainfield trenches >30" to be in the .4 rated SAP

Comments:/Conditions: X Septic permit approved for the attached plan, designed by Rolins Soil & Environmental Services.

INITIAL SITE SKETCH

See attached plan & drawing for Septic System Layout.

AS BUILT SKETCH

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Signed: date 10/5/05 Installed by: Perm Warden

Improvement Permit by: Maina M. Dolan RS date 10/3/05 Operation Permit by: Wendy Sparkes RS date 3/28/06

Authorization to Construct by: Maina M. Dolan RS date 10/3/05 Existing System Inspection by: date

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