FINED

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 138092 PIN# 4664 68 9744.000 4664-68-7553 DATE Jan 18, 2007

OWNER OR APPLICANT Anniston LLC / NI BLOCK PHONE: Business _____ Home _____

ADDRESS 17625 Statesville Rd, Suite 112, Cornelius, N.C. 28031

LOCATION Shearers Rd. (S) TL Anniston Way TL Timberside Dr. TL Hanover Cv. on left

SUBDIVISION Anniston BLOCK / SECTION _____ LOT 95 LOT AREA ± 7 Ac SITE CLASS. B DESIGN FLOW 480 gpd L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 794 Date 5-18-07

Pump Tank: 1000 Gallons; PT 27 Date 12-29-06

Pump Make: Gould's Model DE5 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 960 ± Linear Feet 320

No Lines 4 @ 80' Trench Width 36" ± Max Trench Bottom Depth 36" Gravel Depth N/A ☐ Gravity ☒ Pressure

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

System Description: LPPPBPS

Repair System Description: LPPPBPS

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: ± Per Plan Specs
Interceptor Drain Required. SEE PLAN

INITIAL SITE SKETCH

SEE PLAN from Rollins Soil and Env. Services

Comments/Conditions: 10/3/07 Checked tanks & French Drain.
10/9/07 Checked lines & Set 2 ft 5/32" hole drilled pressure.

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 2-13-07 Installed by: Larry Hinkle

Improvement Permit by: _____ date 1-18-07 Operation Permit by: _____ date 10/19/07

Authorization to Construct by: _____ date 6/20/07 Existing System Inspection by: _____ date _____

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