IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 20458

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

PIN # 4664-77-9493

APPLICANT: SHEA Homes APPLICANT ADDRESS: 8008 COOPERATOR SUITE 300 CHARLOTTE NC 28226

SITE ADDRESS: 153 WALKING HORSE TRAIL - Davidson PHONE: ALT. PHONE: 704-576-3887

SITE DIRECTIONS: SHEARES ROAD (L) ANNISTON WAY (R) BURNELL (L) WALKING HORSE LOT ON (L) AT POWERLINE

SUBDIVISION: ANNISTON SECTION: 4 LOT # 120 LOT AREA: 34,627sqFT DESIGN FLOW: 600gpd L.T.A.R.: 0.3

Septic Tank	1500 (gal)	STB 2061	Date 5-19-16	☑ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms 5	Water Supply
Pump Tank	(gal)	PT	Date	System Description: 25% REDUCTION GRAVITY		☐ Business	No. Persons	☑ Private
Pump Make	Model		Serial #	Repair System Description: 25% REDUCTION GRAVITY		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 4		Linear Ft: 500'	Maintenance Agreement Required: ☐ YES ☑ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width 3'	Max. Trench Bottom Depth 30		Gravel Depth NA	☑ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: INSTALL LINES ON CONTOUR AS SHOWN ON DESIGN
3-10-2016: At time of AC application, a 4 bedroom house [per application + architectural renderings] has been applied for + likewise is being authorized to construct despite the system design for 5 bedrooms. Any modification to the proposed + approved system design will require prior authorization from the LSS and Iredell County Health Department.

INITIAL SITE SKETCH

SEE DESIGN BY MICHAEL ATHANAS + ASSOCIATES

AS BUILT SKETCH

8-11-16: Rowan Precast mid-seam 1500-gal conc. tank w/ a Tuftite EF-6 effluent filter. 5' 0.5"

L1 = 123 6' 10" wood layer
L2 = 142 5' 8.5"
L3 = 131 7' 1.85" wood layer
L4 = 107 5' 4.5"
503 OK

Elevation 30" TB of infiltrative OK Quick 4s used. Echamber

Despite tank relocation, still enough repair room.

House

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. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT with plat valid without expiration ☑ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☐ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT - not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date: 6/12/14 Installed by: Rowan Septic (Kevin Kirkpatrick)

IMPROVEMENT PERMIT by: [signature] Date: 7-21-14 OPERATION PERMIT by: [signature] Date: 8-11-16

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 3-10-2016 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

#4664-88-2769
Now or Formerly
Juanita J. Barker
Deed Book 873 Page 195

Scale 1"=40'

