IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 142627 PIN# ~~4669111778.0~~ 4669-01-5916 DATE 6-18-07

OWNER OR APPLICANT ~~Grant Morrison~~ Vasile Lazar PHONE: Business ______ Home ______

ADDRESS 1607 High Ridge Rd Stanly NC 28164

LOCATION Hwy 115 (R) (R) Shinnville, (L) Albany, at end

SUBDIVISION Bethany Place BLOCK / SECTION ______ LOT 11 LOT AREA 2.15 Acre SITE CLASS. PS DESIGN FLOW 480 gal L.T.A.R. .30

Septic Tank: 1000 Gallons; STB 825 Date 12-28-11

Pump Tank: ______ Gallons; PT ______ Date ______

Pump Make: ______ Model ______ Serial No. ______

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5 @ 80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

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

System Description: 25% Reduction

Repair System Description: SAME → Pumped w/PM

Maintenance Agreement Required: ☐ Yes ☒ No

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

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

No. Bedrooms 4 No. Persons — No. Employees ______

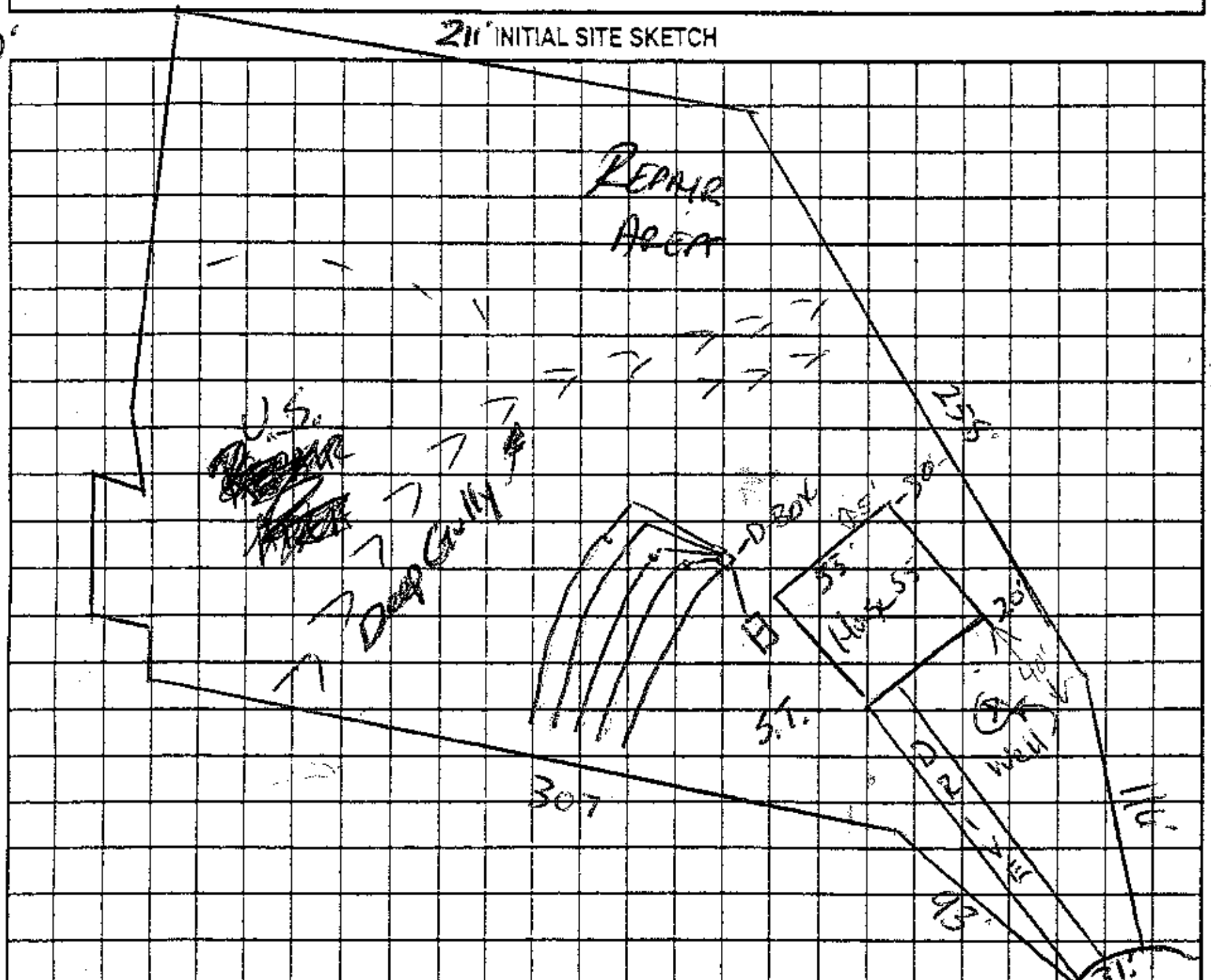
Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: 1) Stay 15' minimum from gully / steep embankment
2) Tanks + Lines to be 5' min. from house
3) Footprints = 55'x55'

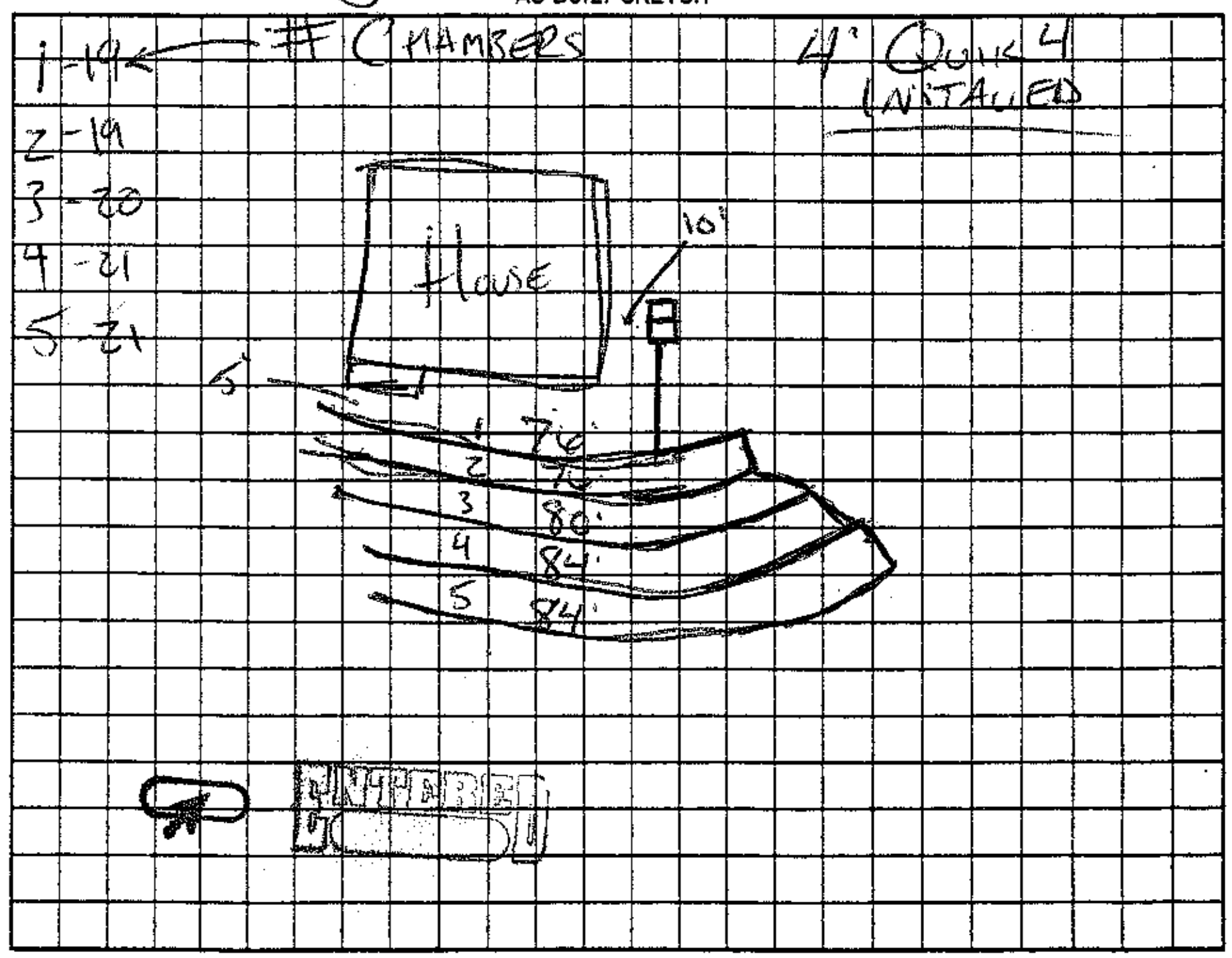
Comments:/Conditions: *Note: House is further from left property line then shown. Drainfield starts 10 ft behind house & runs entire length of house plus 25 ft.

1" = 100'

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: Vasile Lazar date Jul 19-07 Installed by: Rowan Septic

Improvement Permit by: [signature] date 6-18-07 Operation Permit by: [signature] REHS date 2-9-12

Authorization to Construct by: [signature] date 4/15/11 Existing System Inspection by: ______ date ______

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