IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 #130 MOORESVILLE 704-664-5281

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

PERMIT# 121193 PIN# 4676 27 2216 DATE 5/13/05

OWNER OR CONTRACTOR Greg + Anne Wilson PHONE: Business 704-622-5222 Home

ADDRESS 11908 Henderson Hill Rd. Huntersville, NC. 28078

LOCATION 115 N TR LINWOOD RD. TL 529 TO NEW SITE ~300' FROM ROAD

SUBDIVISION No BLOCK / SECTION LOT LOT AREA 10.04 AC SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 4/1/05
Pump Tank: 1000 Gallons; PT 302 Date 8/16/05
Pump Make: ZOELLER Model M152-005 Serial No. 7/05
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 @ 100' Trench Width 3' ~~Max Trench Bottom Depth~~ 3' Gravel Depth No

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI
System Description: PM → 25% Reduced
Repair System Description: SAME
Maintenance Agreement Required: [ ] Yes [ ] No

[X] House/Mod. Home No. Bedrooms 4
[ ] Mobile Home No. Bathrooms 4
[ ] Business No. Employees
[ ] Other

[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

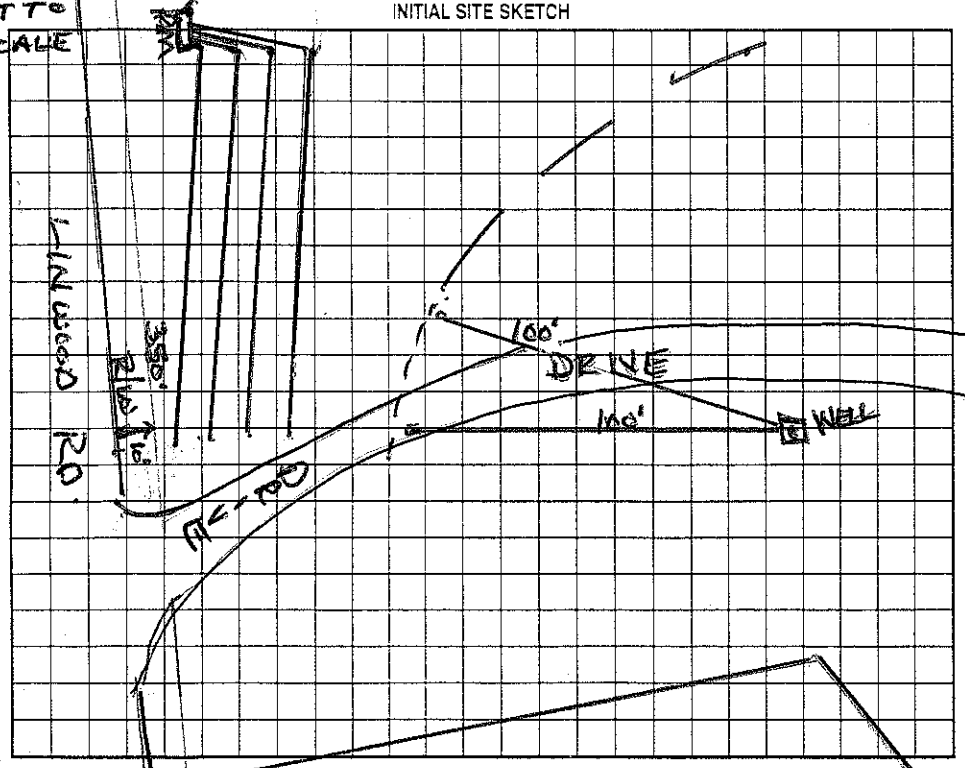
Water Supply: [X] Individual [ ] Public [ ] Community
EXISTING

Comments/Conditions: 425' 875' P/L P/L

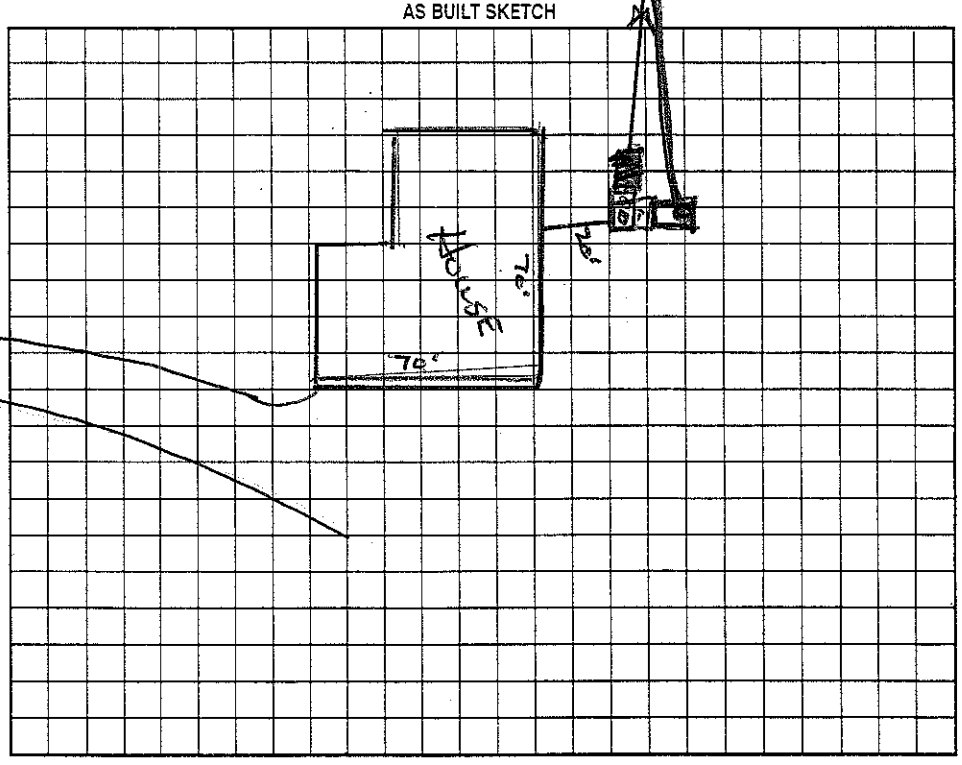
Comments/Conditions:

NOT TO SCALE

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: X date

Improvement Permit by: Wesley Sparks RS. date 5/13/05

Authorization to Construct by: Wesley Sparks RS. date 5/13/05

Installed by: Rowan Septic Tank

Operation Permit by: Wesley Sparks RS date 11/15/05

Existing System Inspection by: date

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