IREDELL COUNTY HEALTH DEPARTMENT

See attached room addition permit.

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

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

PERMIT# 112267 PIN# 4705-31-3328 DATE 11/19/03

OWNER OR CONTRACTOR Heritage Bldg Co of Statesville INC PHONE: Business (704) 528-6644 Home —

ADDRESS 120 Hickory Grove Court Statesville NC 28677

LOCATION I-40 W Old Mtn Road (2) on Alpine Circle (2) loop, on right.

SUBDIVISION Alexander Knoll BLOCK / SECTION — LOT 40 LOT AREA .610 Ac. SITE CLASS V DESIGN FLOW 360 L.T.A.R. .25 gpd/Ft2

Septic Tank: 1,000 Gallons; STB 1012 Date 3-1-04
Pump Tank: 1,000 Gallons; PT 17 Date 3-22-04
Pump Make: Gould Model WE05S11HH Serial No. G046036
Nitrification Field: No Fields 1 Square Feet Equiv. 1440 Linear Feet 360 ft
No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Pump; 25% Reduction
Repair System Description: Pump, Low Pressure Panels
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees —
☐ Other

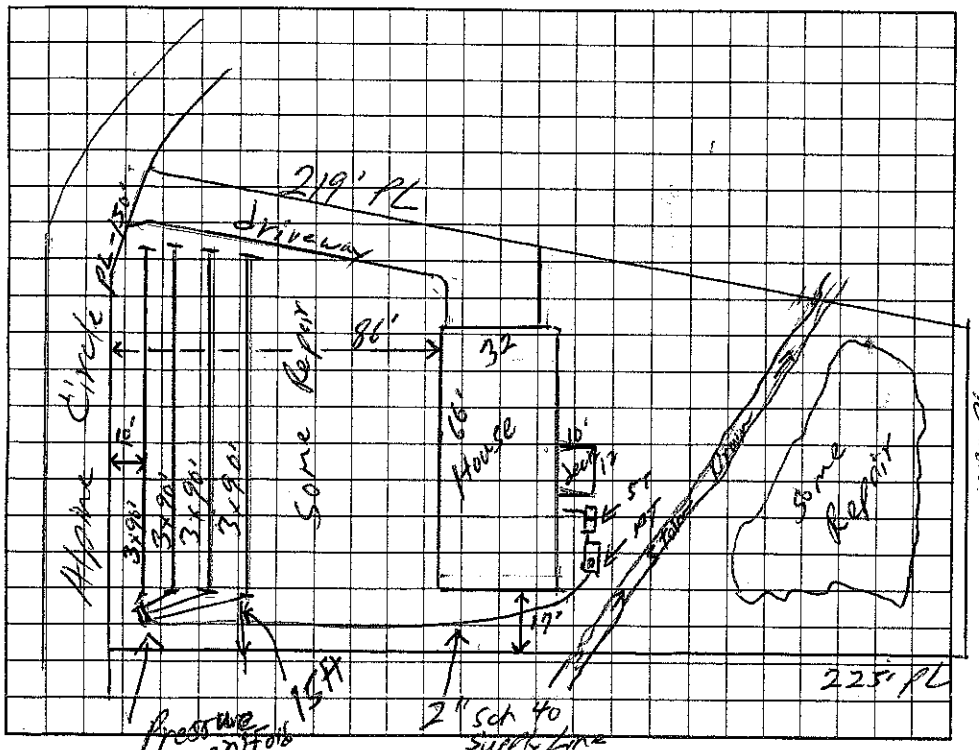
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

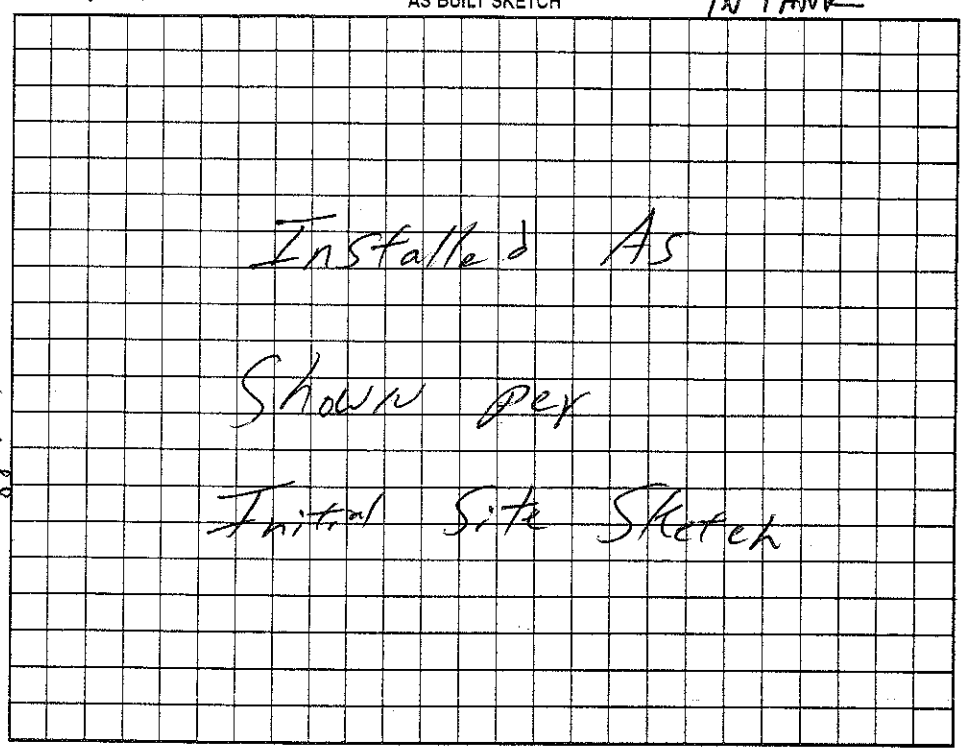
Comments/Conditions: ① Install Liner on controller ② Call Health Dept For Pump/Pressure Manifold Information, if needed.

Comments/Conditions: - Tuff Tite Filter & ST marker Installed - Liner okay pressure check okay, 7/23/04 mgt. - ELECTRICAL & ALARM WIRED SEPARATELY - FLOAT TREE SET IN TANK PUMP

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: _____ date 12-31-03 Installed by: Tommy Frye

Improvement Permit by: William O. Johnson date 11/19/03 Operation Permit by: Christopher M. Thomas, P.S. date 9-27-04

Authorization to Construct by: William O. Johnson date 11/19/03 Existing System Inspection by: _____ date _____

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