IREDELL COUNTY HEALTH DEPARTMENT (CV) STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT # 153386 PIN # 4705-82-2946 DATE 19 November 08

OWNER or APPLICANT (CMH Homes INC) Jonya Vivian Gray PHONE: Business 704-746-4778 Home:

OWNER or APPLICANT ADDRESS 1124 Charlotte Hwy Statesville, N.C.

LOCATION / DIRECTIONS Lippard Farm Rd. Turn onto Massey Dairy Rd. - Comm of Vectra Drive

SUBDIVISION Forest Meadows BLOCK / SECTION 4 LOT # 1 LOT AREA 1.04ac. DESIGN FLOW 480g/d L.T.A.R. 0.3g/ft²/d

Septic Tank 1000 Gallons: STB 769 Date 7-1-08
Pump Tank ____ Gallons: P T ____ Date ____
Pump Make ____ Model ____ Serial # ____
Nitrification Field No Fields 1 No Lines 4 Linear Feet 400
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type I II (III) IV V VI
System Description: 25% Reduction
Repair System Description: 25% Reduction
Maintenance Agreement Required ☐ YES ☑ NO
☑ GRAVITY ☐ PRESSURE

☑ Residence No. Bedrooms 4
☐ Business No. Persons ____
☐ Other No. Employees ____
☐ Slab ☑ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☐ Private ☑ Public ☐ Community

Comments / Conditions
Follow contour / Honor all setback requirements.

Comments / Conditions
Tough-Tite Filter

INITIAL SITE SKETCH

Please see Attached site sketch.

AS BUILT SKETCH

Installed As Drawn

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 w / plot valid without expiration.* ☑ *IMPROVEMENT PERMIT w / 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 11-19-08

Improvement Permit by: [signature] R.S. Date 19 Nov 08

Authorization to Construct by: [signature] R.S. Date 19 Nov. 08

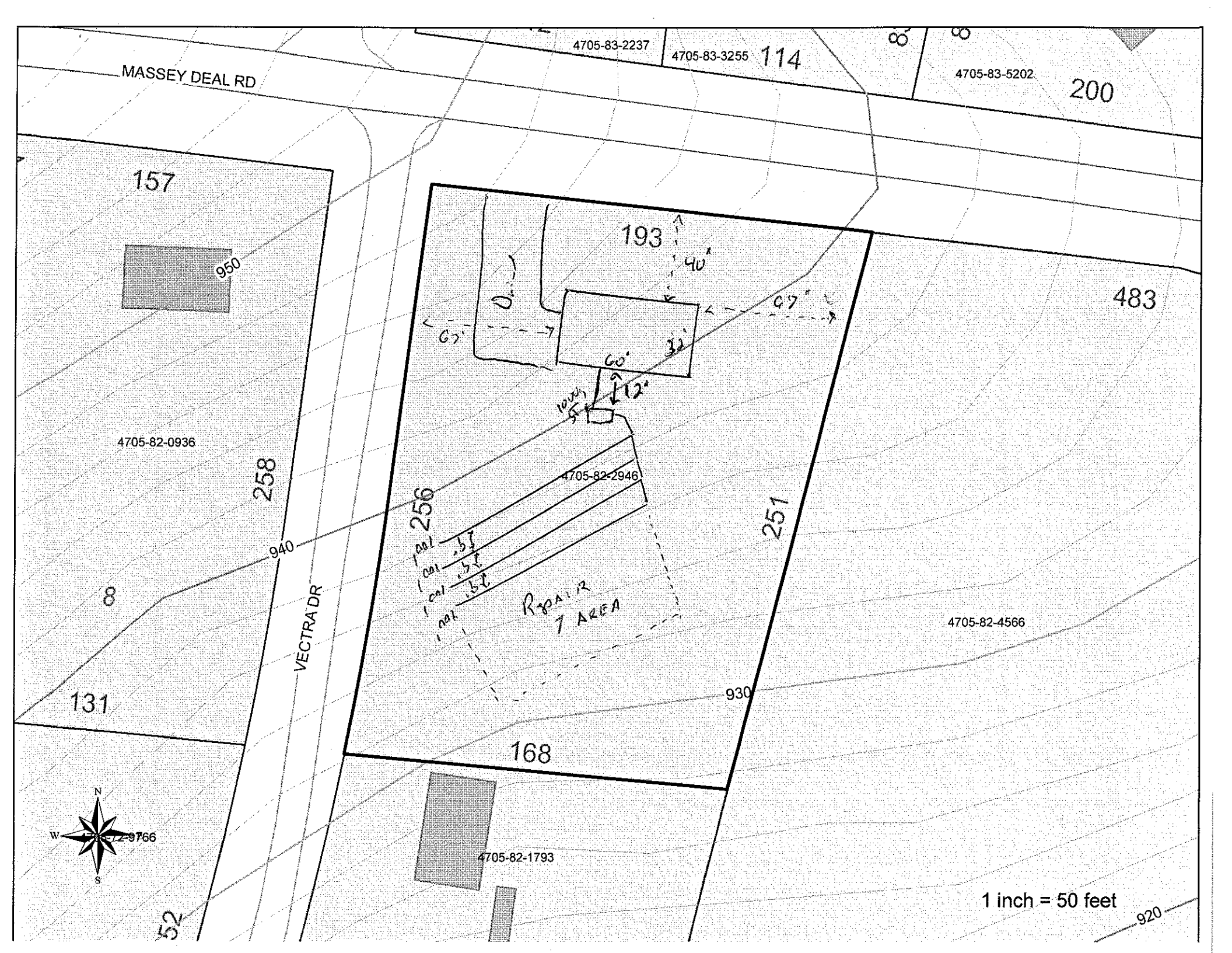
Installed by: [signature]

Operation Permit by: [signature] R.S. Date: 20 Nov 08

Existing System Inspected by: ____ Date: ____

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant


MASSEY DEAL RD
4705-83-2237
4705-83-3255
114
4705-83-5202
200
157
950
193
40'
483
60'
32'
12'
4705-82-0936
258
4705-82-2946
256
251
940
8
VECTRA DR
REPAIR
1 AREA
4705-82-4566
930
131
168
4705-82-1793
52
920
1 inch = 50 feet