IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 100495 PIN# 4706792849 DATE 5/31/01

OWNER OR CONTRACTOR Mike Honeycutt PHONE: Business Home (704)-528-4343

ADDRESS 189 Penicillin Point Troutman NC 28166

LOCATION Hwy 90W, Turn (R) Antiteam Rd, (R) on Congo Rd, (R) on John Adams on Right

SUBDIVISION Thomas E. Setser BLOCK / SECTION — LOT #6 LOT AREA 1.42 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 1007 Date 7-19-03

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ____ Square Feet 1029 Linear Feet 344

No Lines 4@86 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

[X] New System [ ] Repair System Type: I (II) III, IV, V, VI

System Description: Gravity, Conventional

Repair System Description: Gravity, 25% Reduction

Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other

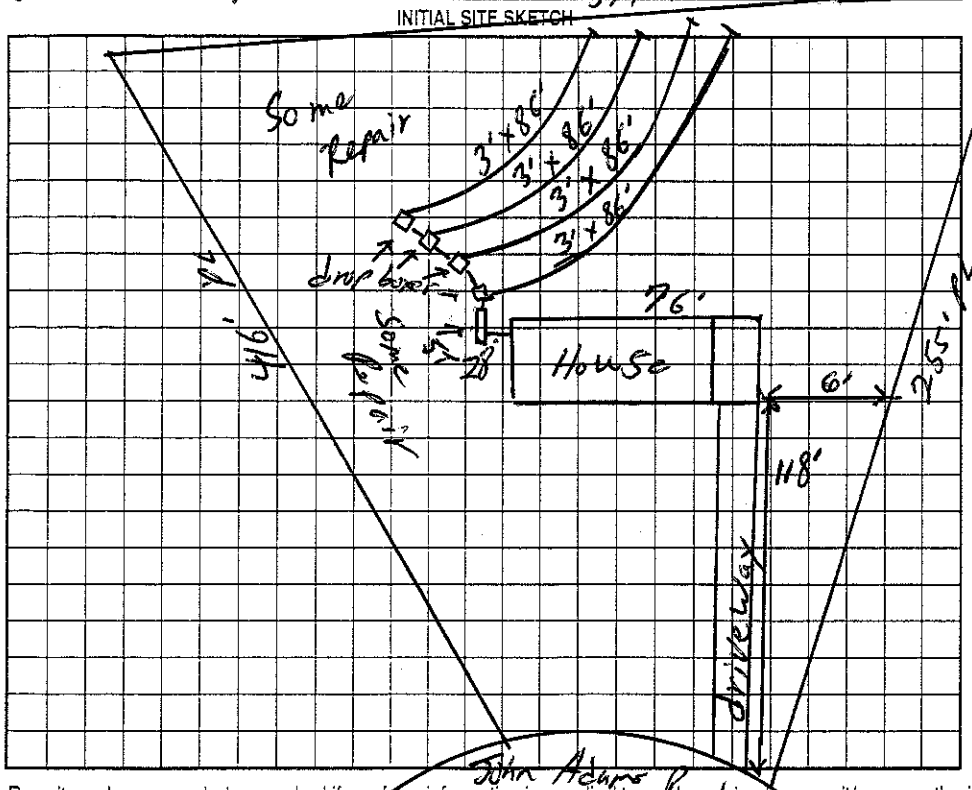
No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

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

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

Comments:/Conditions:

(Not to Scale)



Comments:/Conditions:

Tuff-Tite Filter Installed

AS BUILT SKETCH

Installed As Shown per Initial Site Sketch

Line Lengths - 90, 90, 90 + 75 ft bottom line

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: Danny E. Sloan date 6/18/01

Improvement Permit by: William O. Johnson date 5/31/01

Authorization to Construct by: William O. Johnson date 5/31/01

Installed by: William Rodney Wright 11/24/03

Operation Permit by: William O. Johnson date 12/29/03

Existing System Inspection by: _____ date _____

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