This permit voids previously issued permit dated 9/24/03.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 114264 PIN# 4706-85-9996 DATE 10/1/03

OWNER OR CONTRACTOR J. Todd Ellis Builders PHONE: ~~Business~~ Cell (704) 902-0119 Home —

ADDRESS 315 Seven Springs Loop Statesville, NC, 28625

LOCATION Hwy 90 West, (R) Scotts Creek Rd, (L) on Emma Lane, 2nd lot on left (115 Emma Lane)

SUBDIVISION Sterling Oaks BLOCK / SECTION — LOT 6 LOT AREA 4.81 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. —

Septic Tank: 1,000 Gallons; STB — Date —

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model Eq-ft Serial No. —

Nitrification Field: No Fields 1 Square Feet 400 Linear Feet 100

No Lines 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Gravity, 25% Reduction

Repair System Description: Gravity, 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees —

☐ Other —

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

Water Supply: ☐ Individual ☒ Public ☐ Community

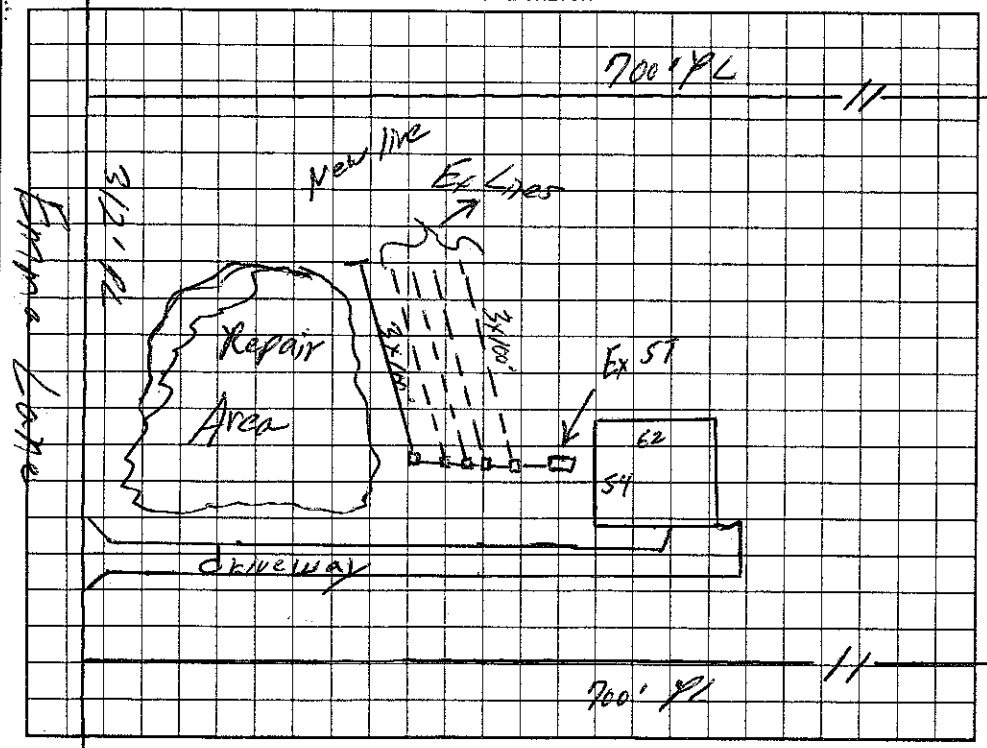
Comments:/Conditions:

1) Install one line 100 ft with 25% reduction system

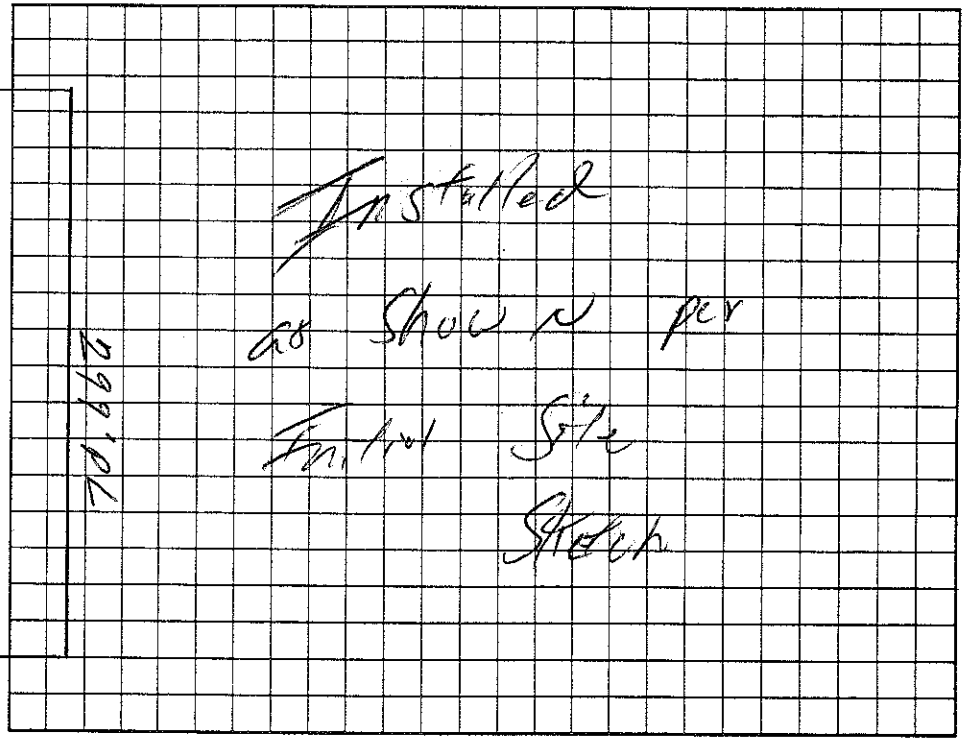
Comments:/Conditions:

16 Infiltrator Chambers Installed

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: J. Todd Ellis date 10-1-03 Installed by: David Yountz

Improvement Permit by: William O. Johnson date 10-1-03 Operation Permit by: William O. Johnson date 10/2/03

Authorization to Construct by: William O. Johnson date 10-1-03 Existing System Inspection by: — date —

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