IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-3[illegible]

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

PERMIT# 103783 PIN# 4710-49-0431 DATE 8-5-02

OWNER OR CONTRACTOR TERENCE LORD PHONE: Business Home 336-659-9854

ADDRESS 1040 STILL POINT DRIVE WINSTON-SALEM NC 27103

LOCATION BUFFALO SHOALS RD, TL LAUREL CAMP RD, TR HARBORGATE, TL HARBOR WATCH, TL HIGH LAKE, AT CURVE ON LE

SUBDIVISION HARBOR WATCH BLOCK / SECTION I LOT 5 LOT AREA 0.76 ACRE SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GAD/F

Septic Tank: 1000 Gallons; STB 794 Date 6-22-02

Pump Tank: 1000 Gallons; PT 283 Date 6-19-02

Pump Make: LITTLE GIANT Model 14EH-CIM Serial No 514220 AJA

Nitrification Field: No Fields 1 Square Feet 60 TO 1600 Linear Feet 270

No Lines SIX Trench Width 24" Max Trench Bottom Depth 36"

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

System Description: 50% REDUCTION, LOW PRESS

~~Repair~~ System Description: 50% REDUCTION, LOW PRESS

Maintenance Agreement Required: ☑ Yes ☐ No

Gravel Depth SAND 6" ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

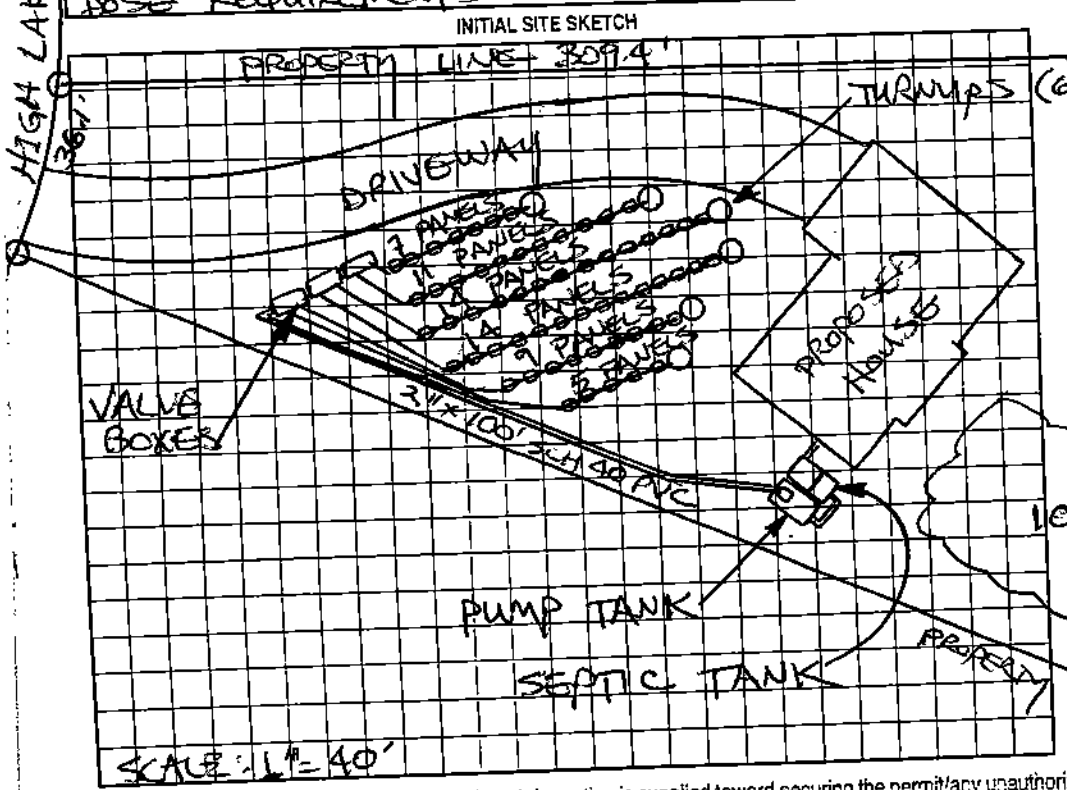
No. Bedrooms 4 No. Bathrooms ___ No. Employees ___

Water Su ☑ Individ ☐ Public ☐ Comm WELL

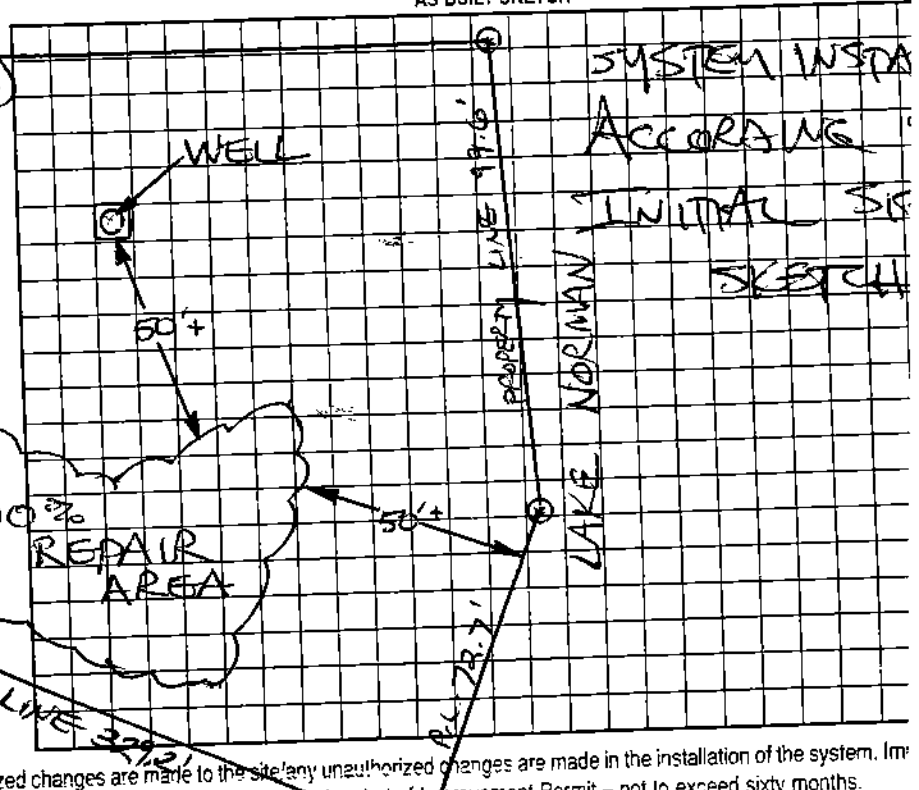
Comments/Conditions: ① INSTALL 50% REDUCTION SYSTEM USING 60 PPBPS PANELS USING LOW PRESSURE DISTRIBUTION ② SEE ATTACHED SHEETS FOR PUMP & PRESSURE DOSE REQUIREMENTS

Comments/Conditions: ③ A CONTRACT SHALL BE EXECUTED BETWEEN THE SYSTEM OWNER & A MANAGEMENT ENTITY PRIOR TO ISSUANCE OF OPERATION PERMIT

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. Im 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 Wayne Doyle date 8-5-02 Installed by: STATESVILLE BACKHOE 10-24-02

Improvement Permit by: STEVE HEDRICK date 8-5-02 Operation Permit by: STEVE HEDRICK date 10-2

Authorization to Construct by: STEVE HEDRICK date 8-5-02 Existing System Inspection by: ___ date ___

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