*THIS PERMIT REPLACES EXPIRED PERMIT, ISSUED 3-7-91. (CI)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 112223 PIN# 4710-58-4792 DATE 05/19/03

OWNER OR CONTRACTOR GINA STEVENS PHONE: Business 704-763-7749 Home 704-655-0131

ADDRESS 2415 HOPECREST DR. CHARLOTTE, NC 28210

LOCATION BUFFALO SHOALS RD., (L) LAUREL COVE, (L) ISLAND TERRACE, @ CUL-DE-SAC ON LEFT.

SUBDIVISION RIVER HILLS EST. BLOCK / SECTION ____ LOT 33 LOT AREA 1.11 ACRES SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons; STB 1017 Date 1-3-06

Pump Tank: 1,000 Gallons; PT 17 Date 7-18-06

Pump Make: Goulds Model WE0710M Serial No. #0693760

Nitrification Field: No Fields 1 Square Feet EQ to 1,200 Linear Feet 200

No Lines 4@50' Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: PUMP, 50% REDUCTION

Repair System Description: LOW PRESSURE, 50% REDUC.

Maintenance Agreement Required: [ ] Yes [X] No

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

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

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

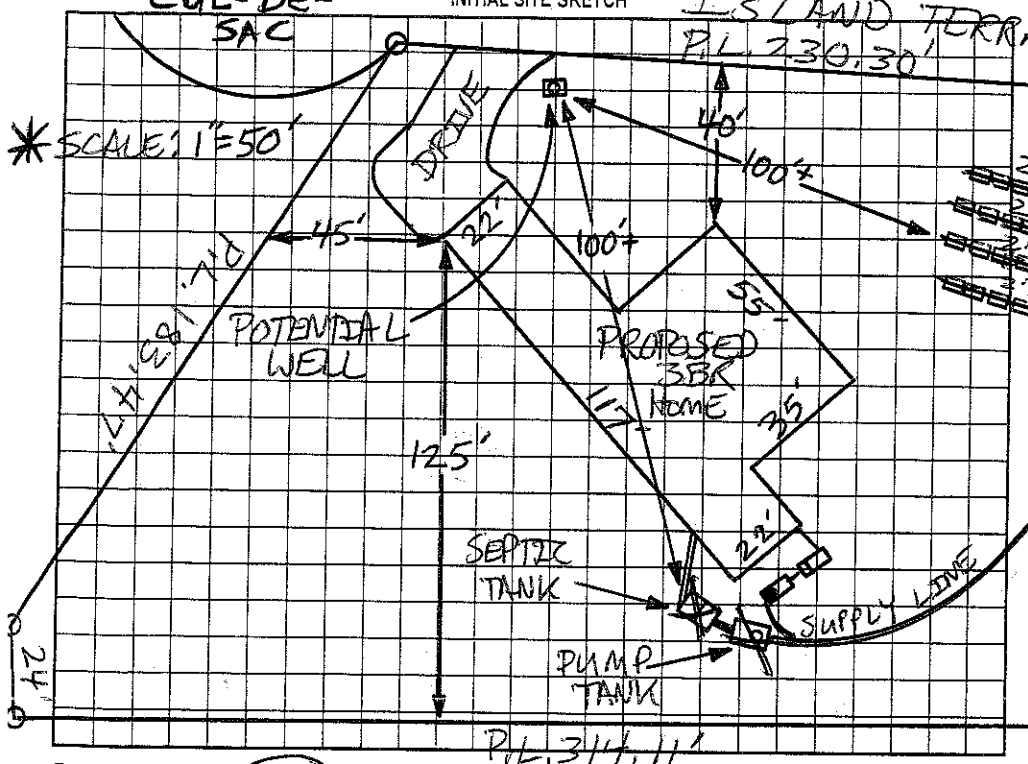
Water Supply: [X] Individual [ ] Public [ ] Community WELL

"GO Smaller" per Inst.

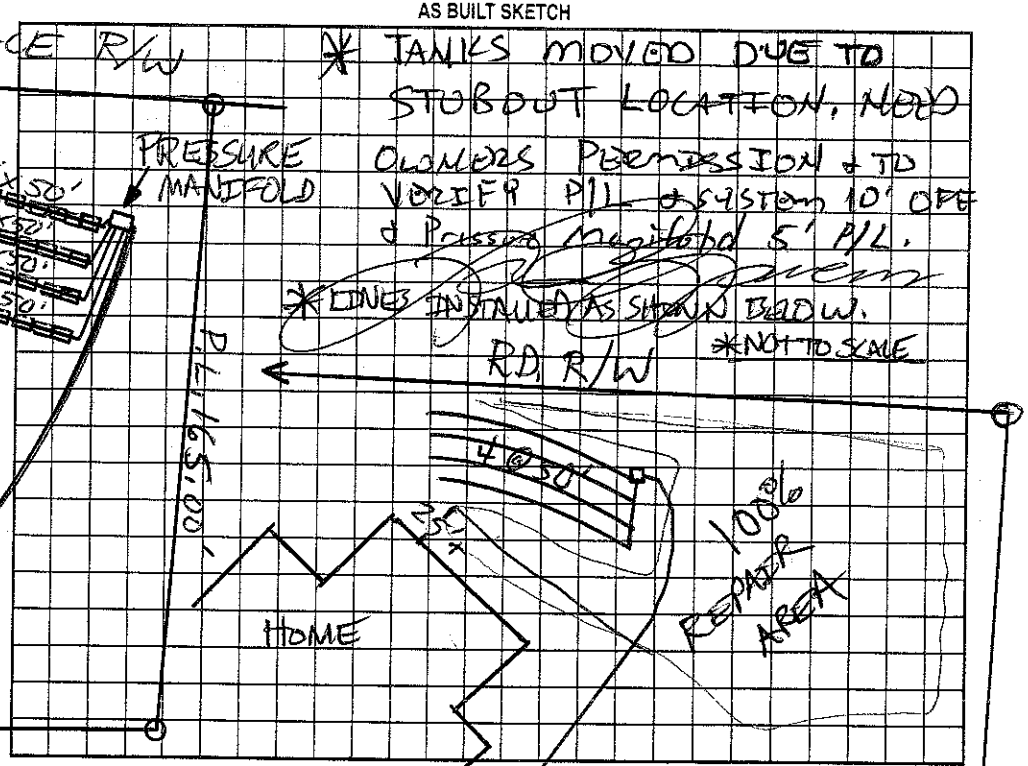
Comments/Conditions: (1) INSTALL SYSTEM USING 11 PANELS PER LINE (44 PANELS TOTAL TO EQUAL 200'). (2) WELL MUST BE 100' PLUS FROM SYSTEM (15A NCAC 18A .1956(3)). (3) CALL FOR SYSTEM TO BE RELOCATED AFTER CLEARING

Comments/Conditions: → + FOR PUMP/PRESSURE MANIFOLD INFO. IF NEEDED. TUFFTITE Filter & RISERS

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: [signature] date 5/20/03 Installed by: PIEDMONT BACKHOE (STEVE JORDAN)

Improvement Permit by: Patrick Mitchell date 05/19/03 Operation Permit by: [signature] date 11-28-06

Authorization to Construct by: Patrick Mitchell date 05/19/03 Existing System Inspection by: ____ date ____

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