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IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 13901Z PIN# 4712-34-9644 2656 DATE 11/22/06

OWNER OR APPLICANT JERRY PRICE PHONE: Business 704-902-4355 Home 704-878-0330

ADDRESS 239 LEWIS FERRY RD. STVL. 28677

LOCATION I-40W, (R) OLD MTN. RD., (R) CELESTE EUFOLA RD., (L) EUFOLA RD., (L) ATWELL DR., LOT ON LEFT,

SUBDIVISION EUFOLA FARMS BLOCK / SECTION ____ LOT 26 LOT AREA 2.0 AC. SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1,000 Gallons; STB TP 1012-1000 Date 2-27-07
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ to 1200 Linear Feet 315'
No Lines 3 Trench Width 36" Trench Bottom Depth (36") Gravel Depth N/A

[X] New System [ ] Repair [ ] Expansion System Type: I (II) III IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 50% REDUC., LOW PRESS.
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other
No. Bedrooms 3 No. Persons ____ No. Employees ____

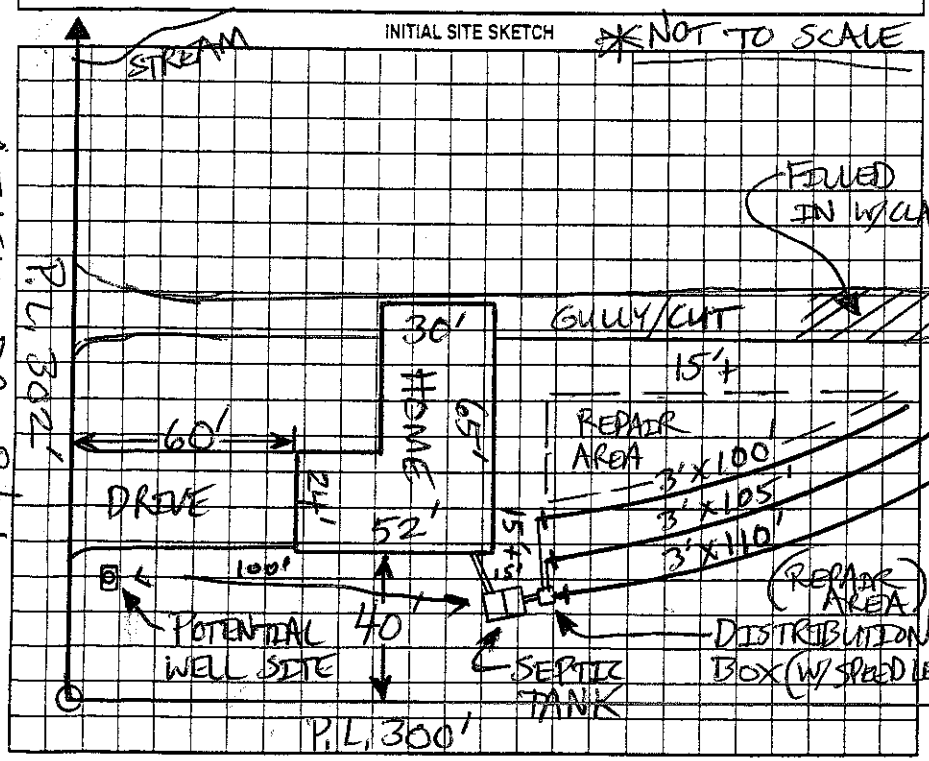
Water Supply: [X] Individual WELL [ ] Public [ ] Community

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

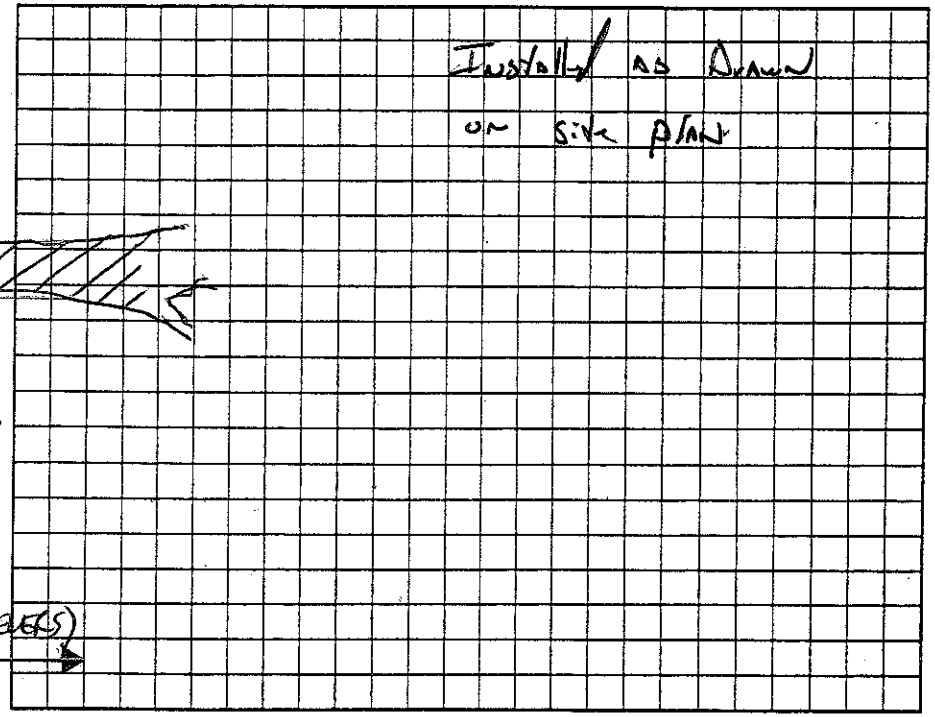
Comments:/Conditions: (1) INSTALL DRAIN LINES, USING 36" DEEP TRENCH BOTTOMS,

Comments:/Conditions: Filter installed / Risers on TANK

INITIAL SITE SKETCH *NOT TO SCALE



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 [X] Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: ____ date ____

Improvement Permit by: ____ date 11/22/06

Authorization to Construct by: ____ date 11/22/06

Installed by: Dale Wingler

Operation Permit by: ____, R.S. date 6 June 07

Existing System Inspection by: ____ date ____

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