* THIS PERMIT VOIDS PREVIOUSLY ISSUED PERMIT ON 03/03/94

# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 077024 PIN# ~~4639-73-4550~~ 4720512558 DATE 09/30/02

OWNER OR CONTRACTOR LEONARD WILSON PHONE: Business 704-664-5662 Home

ADDRESS P.O. BOX 85 DAVIDSON, NC 28036

LOCATION PERTH RD, (R) STATEPARK RD., (L) WILDLIFE RD., (R) SIERRA WOOD, (R) MAPLE VIEW, 98A IN CURVE, ON LEFT 98 @ END OF CUL-DE-SAC

SUBDIVISION WILDLIFE BAY BLOCK / SECTION II LOT 98, 98A LOT AREA 98A = 1.19 ACRES 98 = N/A SITE CLASS. PS DESIGN FLOW 480 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons; STB 794 Date 04/05/03
Pump Tank: 1,000 Gallons; PT 283 Date 03/29/03
Pump Make: MYERS Model P-102 Serial No. 1 H.P.
Nitrification Field: No Fields 1 Square Feet EQ to 1,600 Linear Feet 400
No Lines 5 x 80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

[X] New System [ ] Repair System Type: I, II, (III), IV, V, VI
System Description: 25% REDUCTION, OFFSITE PUMP
Repair System Description: 50% REDUCTION, LP ONSITE & OFFSITE
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other
No. Bedrooms 4 No. Bathrooms 4 No. Employees

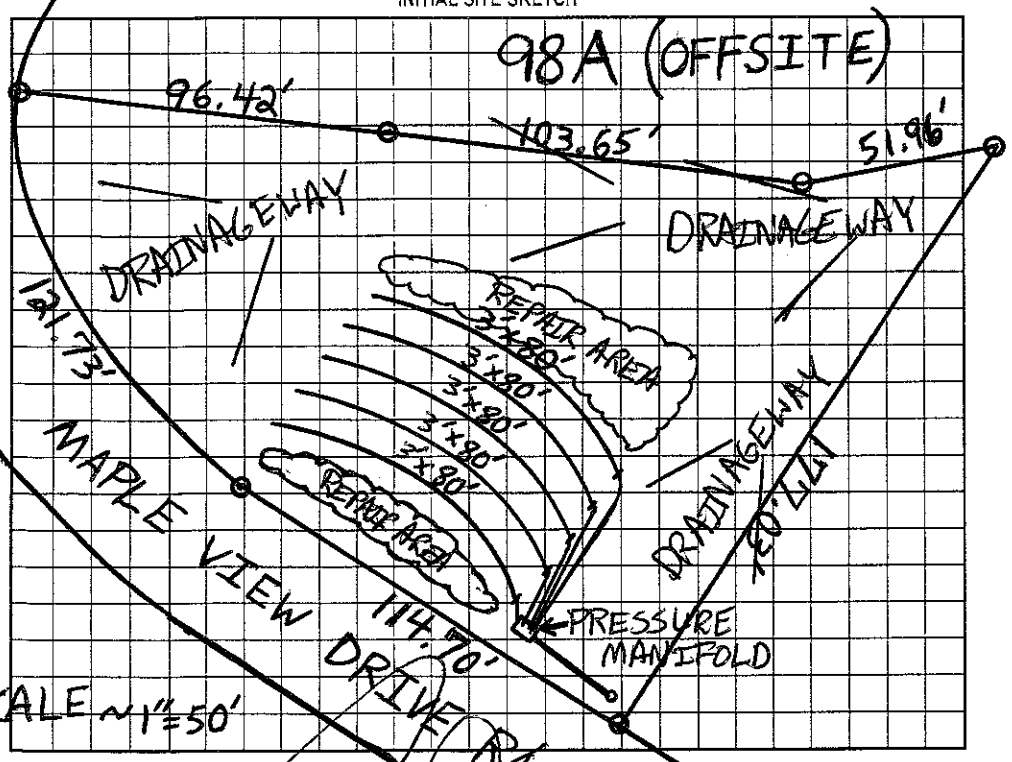
[ ] Slab [ ] Crawl Space [X] Basement w/plumbing [ ] Basement wo/plumbing

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

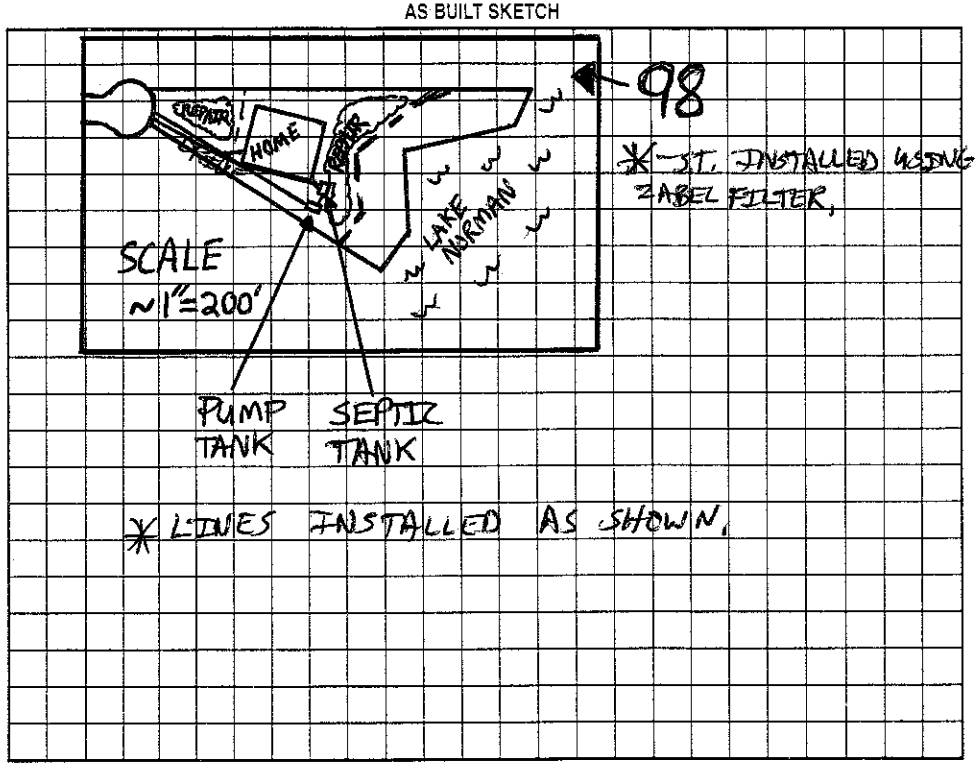
Comments/Conditions: (1) REPAIR AREA MUST NOT BE ALTERED, SEE ATTACHED SHEETS FOR MORE DETAILED MAPS OF REPAIR & INITIAL AREAS. (2) INSTALL SYSTEM AS SHOWN ON CONTOUR. (3) KEEP SYSTEM OUT OF DRAINAGEWAYS (4)

Comments/Conditions: > CALL PRIOR TO INSTALLATION FOR PUMP & PRESSURE MANIFOLD INFO. & FOR REFLAGGING IF NECESSARY. (5) MAINTAIN ALL SETBACKS (6) AFTER INSTALLATION OFFSITE SYSTEM MUST BE MAINTENANCED.

INITIAL SITE SKETCH




AS BUILT SKETCH




* S.T. INSTALLED USING 2ABEL FILTER.

* LINES INSTALLED AS SHOWN.

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: _____ date 09/30/02 Installed by: TIM AMMONS (TANKS 5/30/03) (LINES 6-11-03)

Improvement Permit by: Patrick Mitchell date 09/30/02 Operation Permit by: William O. Johnson date 8/28/03

Authorization to Construct by: Patrick Mitchell date 09/30/02 Existing System Inspection by: _____ date _____

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