*THIS PERMIT REPLACES REVOKED PERMIT ISSUED ON 10/25/01

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 102340 PIN# 4722-86-6595 DATE 11/27/02

OWNER OR CONTRACTOR MATT MADISON PHONE: Business 704-838-0461 Home 704-252-0249

ADDRESS 327 MESSICK AVE. MOORESVILLE, NC 28115

LOCATION OLD. MTN. RD., (L) WALLACE SPRINGS, (L) CHARIS, (R) MINYARD LN., @ END ON RIGHT OF CUL-DE-SAC.

SUBDIVISION WILLIAMS FARM BLOCK / SECTION III LOT 44 LOT AREA 1.6457 ACRES SITE CLASS PS DESIGN FLOW 480 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons: STB 760 Date 06/10/02
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ to 1,600 Linear Feet 400
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36"

X New System ☐ Repair System Type I II (III) IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 50% REDUCTION, LOW PRESSURE
Maintenance Agreement Required: ☐ Yes X No
Gravel Depth N/A ☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

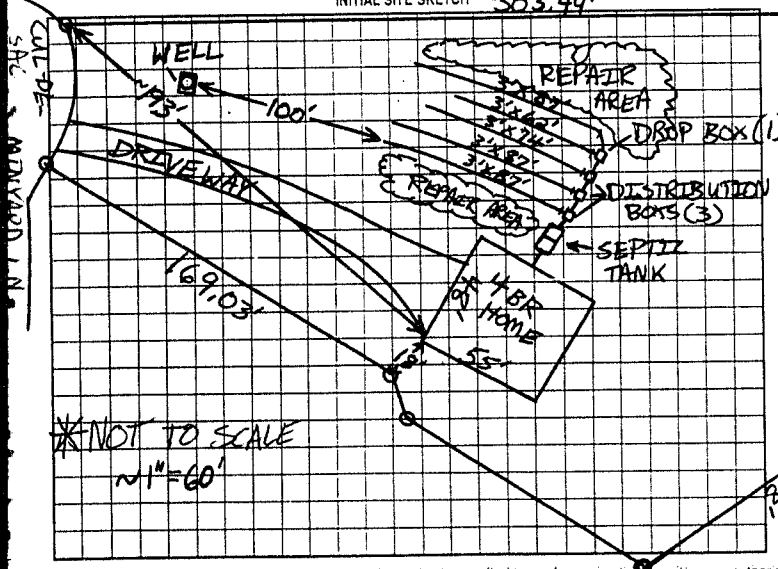
X House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ____
☐ Other ____

Water Supply: X Individual ☐ Public ☐ Community WELL

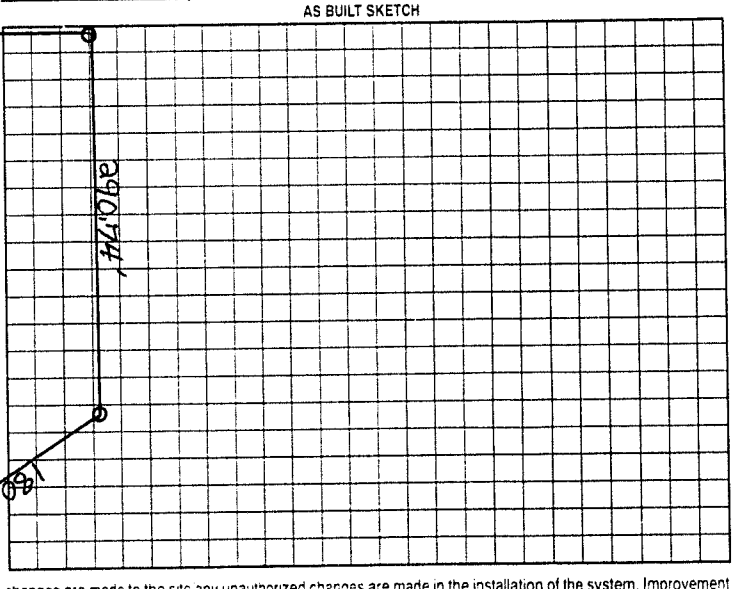
Comments/Conditions: (1) WELL MUST BE 100' PLUS FROM SYSTEM.

Comments/Conditions: (1) SYSTEM WAS INSTALLED WITHOUT VALID PERMIT. (2) 395' OF DRAIN LINE WAS INSTALLED. (3) SYSTEM WAS INSTALLED DURING PERIOD OF WET SOIL CONDITIONS.

INITIAL SITE SKETCH 303.49'



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: Jason Mills date 11/27/02 Installed by: JAKE MILLER

Improvement Permit by: Patrick Mitchell date 11/27/02 Operation Permit by Patrick Mitchell date 11/27/02

Authorization to Construct by: Patrick Mitchell date 11/27/02 Existing System Inspection by: ____ date ____

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