IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 86653 PIN# 4726316491 DATE 12-14-99

OWNER OR CONTRACTOR Allan Wood PHONE: Business 828-396-1126 Home

ADDRESS 750 Circle Dr. Lenair N.C.

LOCATION Scotts Creek TR miller Farm TR Dee TR Deercroft at end

SUBDIVISION Deercroft BLOCK / SECTION 4 LOT 193 LOT AREA .72 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 6/19/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: (I) III. IV. V. VI
System Description: Conv. Gravity
Repair System Description: Gravity 25% Reduct
Maintenance Agreement Required: ☐ Yes ☑ NO

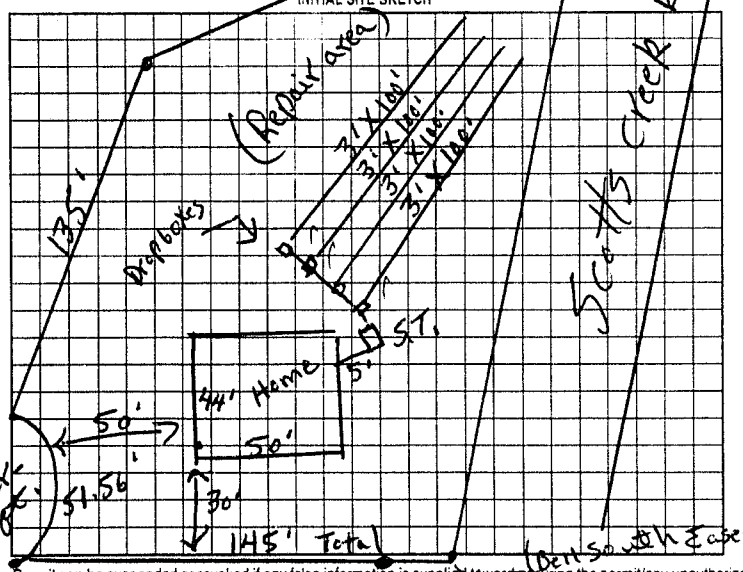
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions:

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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: Danny B Wood date

Installed by: Herb Reid

Improvement Permit by: R. C. Moore date 12-14-99

Operation Permit by: [signature] RST date 9/1/00

Authorization to Construct by: R. C. Moore date 12-14-99

Existing System Inspection by: date

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