2.30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT # 154812 I# 4731-40-6843 496843 DATE 2-11-09

OWNER or APPLICANT RYAN KEITH Whitehead (Abby) PHONE: Business 704-657-9600 Home:

OWNER or APPLICANT ADDRESS PO BOX 465 Mt. MOURNE NC 28123

LOCATION / DIRECTIONS 21 SOUTH R ONR L EAST MONRO L First Trailer on LEFT PAST FIELD

SUBDIVISION BLOCK / SECTION LOT # LOT AREA 32367 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank 1000 Gallons: STB Date

Pump Tank Gallons: P T Date

Pump Make Model Serial #

Nitrification Field No Fields 1 No Lines 2 Linear Feet 135'

Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth 12" ☒ GRAVITY ☐ PRESSURE

☐ New System ☐ Repair ☒ Expansion System Type I (II) III IV V VI

System Description: GRAVITY [redacted] CONVENTIONAL

Repair System Description: LP 50'± REDUCTION

Maintenance Agreement Required ☐ YES ☒ NO

☐ Residence No. Bedrooms 3 ☐ Business No. Persons 6 ☐ Other No. Employees ☒ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions (1) This permit was redrawn for house movement only. House is 26' to well & 5' OFF tank and repair area. This includes the deck. (2) EVERY-Thing was staked at time of visit.

INITIAL SITE SKETCH

SEE ATTACHED SYSTEM DESIGN BY LORNE LOOK, R.S.

Comments / Conditions

End Cap distribution

AS BUILT SKETCH

Came out to Distribution box on existing system. Speed Level to Get New Line Cast 12-30-09

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 w / plat valid without expiration.* ☒ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☒ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Keith Whitehead Date 2-13-09

Improvement Permit by: [signature] Date 2-11-09

Authorization to Construct by: [signature] Date 2-11-09

Installed by: Wayne Klontz

Operation Permit by: [signature] Date: 12-30-09

Existing System Inspected by: Date:

YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant