IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101125 PIN# 4936-84-8993 DATE 2/19/01

OWNER OR CONTRACTOR Jack Borders PHONE: Business 902-4978 Home (704) 881-0025

ADDRESS 188 Knox Farm Road. Statesville N.C. 28677

LOCATION 21 N (L) on Fort Dobbs, (R) on Cooper Farm, (L) on Glenview, (R) on Rock Island, Lot on Right

SUBDIVISION Willow Brook BLOCK / SECTION — LOT 17 LOT AREA .38 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 4,000 Gallons: STB 9-7-01 Date 1007
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No ____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 360
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth —

X New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity, 25% Reduction
Repair System Description: Pump, 50% Reduction
Maintenance Agreement Required: ☐ Yes X No
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

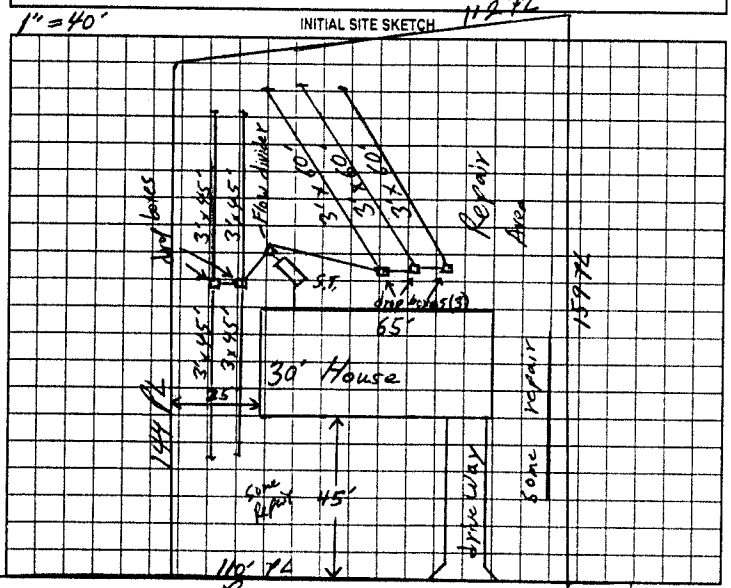
Water Supply: ☐ Individual X Public ☐ Community

Comments/Conditions: (1) Install 60 chambers or 36-10ft HDES Sections (2) Use Flow divider Tee for Septic Field

Comments/Conditions - Septic Tank Marker Installed
- Poly-Loft Filter Installed
- Infiltrator Chambers Installed

1" = 40'

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as Shown per Initial Site 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: [signature] date 2/27/01 Installed by: Todd Bentley / Dale Fox

Improvement Permit by: William O. Johnson date 2/19/01 Operation Permit by: William O. Johnson date 10/19/01

Authorization to Construct by: William O. Johnson date 2/19/01 Existing System Inspection by: ____ date ____

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