1:00 11:30 See outbuilding added 5/4/10 on site.

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 149791 PIN# 4746253964 DATE 5-13-08

OWNER/OR APPLICANT (Wilson Building, Inc) Grace Building Co. PHONE: Business 704 880 8219 Home 704 881 0071

ADDRESS 141 Postell Drive

LOCATION 21N to Whites Farm (L) on Nix - Site address 141 Postell Dr.

SUBDIVISION Shadow Wood BLOCK / SECTION _____ LOT 6 LOT AREA .5 SITE CLASS. P5 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 4-29-08

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300

No Lines 4 Trench Width 36 Max Trench Bottom Depth 36

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

System Description: 25% Reduction Gravity

Repair System Description: 50% Reduction Pump

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ____

☐ Business No. Employees ____

☐ Other _____

Water Supply: ☐ Individual ☒ Public ☐ Community

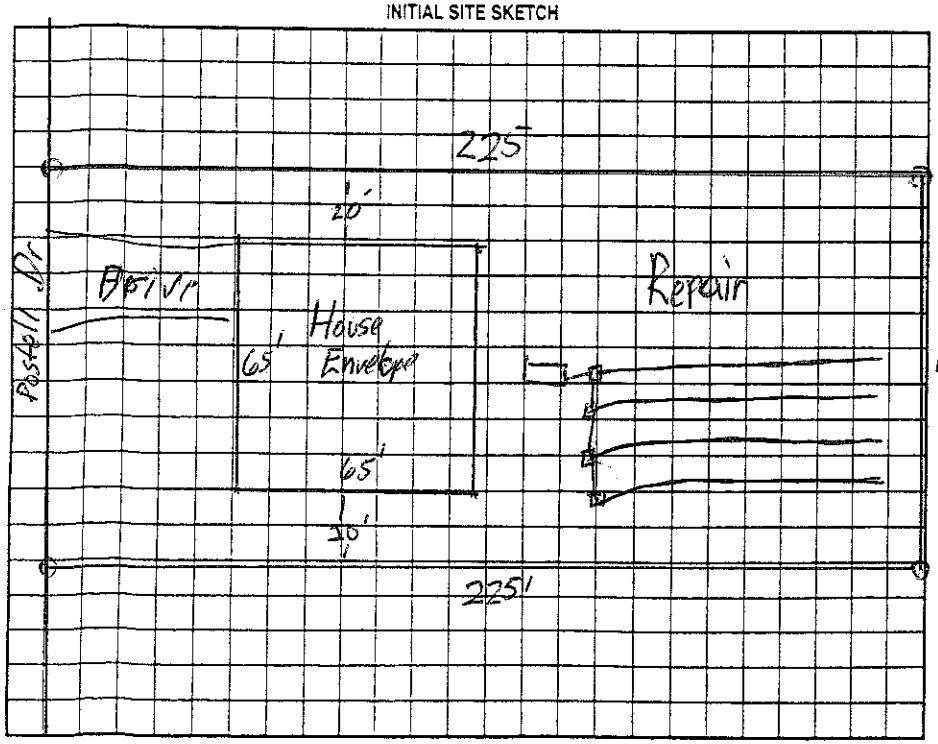
Gravel Depth _____ ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions:

* Scrape and remove fill mound from septic area (18" max)

Comments/Conditions:

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 plan 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: Kay Wil date 5-20-08 Installed by: Steve Jordan

Improvement Permit by: James date 5-13-08 Operation Permit by: James date 3-24-09

Authorization to Construct by: _____ date _____ Existing System Inspection by: _____ date _____

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

new owner: Harold Hartman