IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 118076 PIN# 4747-42-9852 DATE 3/9/04

OWNER OR CONTRACTOR Chris Davidson PHONE: Business (704) 363-2634 Home

ADDRESS P.O. Box 5602 Statesville, N.C. 28687

LOCATION Hwy 21 N. (L) Shumaker Rd to White Farm Rd (L) Doe Run 2nd lot on Right

SUBDIVISION Cobblestone Meadows BLOCK / SECTION — LOT 45 LOT AREA 1.0 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .30 gpd

Septic Tank: 4000 Gallons; STB 1012 Date 9-20-06

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 535

No Lines 5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Conventional Gravity

Repair System Description: Pump 25% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 3 No. Employees ____

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

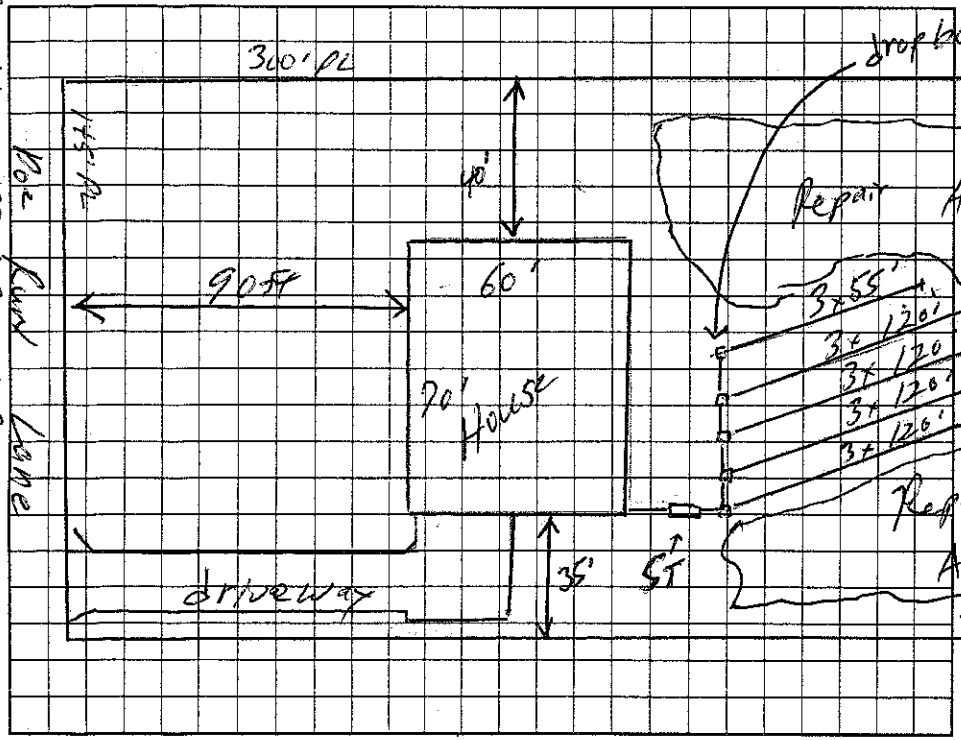
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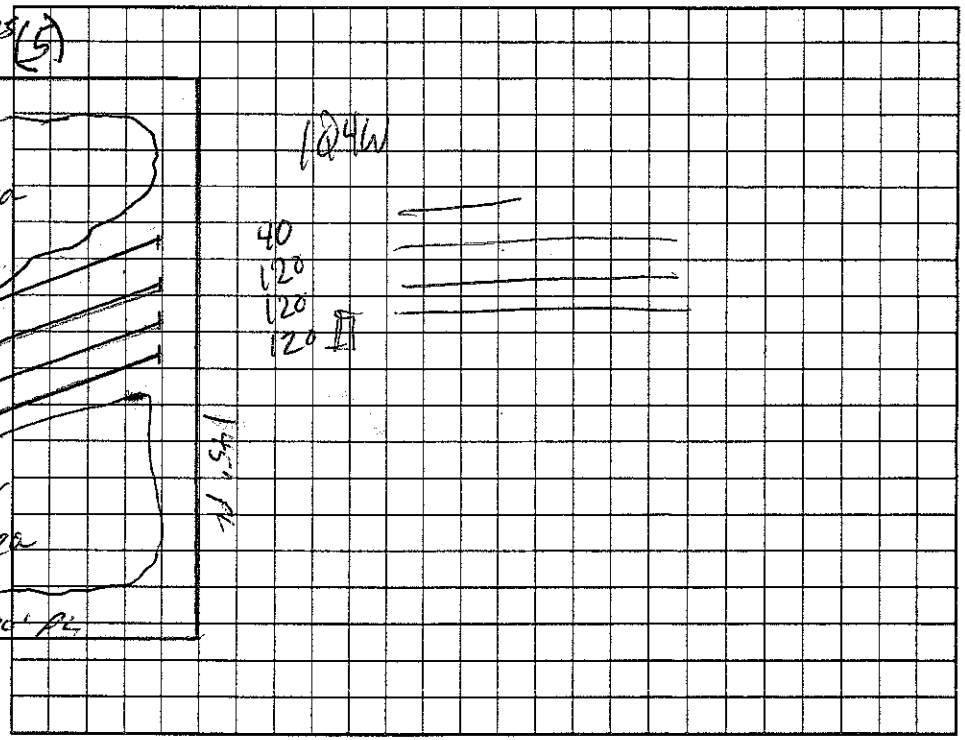
ST marker
Yellow Filter

Site Address: 118 Doe Run Ln.

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: _____ date 3/9/04

Improvement Permit by: _____ date 3/9/04

Authorization to Construct by: _____ date 7-7-06

Installed by: David Yount

Operation Permit by: _____ date 4-4-07

Existing System Inspection by: _____ date ____

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