IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 106331 PIN# 4749-63-0769 DATE 6/17/02

OWNER OR CONTRACTOR Jimt Ray McMillan PHONE Business — Home (704) 876-6372

ADDRESS 700 Whites Farm Rd Statesville N.C. 28625

LOCATION 21 N. on Chamber Drive, R on Saddlewood Lane, R on Appaloosa Lane, Lot on left.

SUBDIVISION Saddlewood BLOCK / SECTION — LOT 27 LOT AREA .573 Ac. SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .30

Septic Tank: 4,000 Gallons: STB 1012 Date 4-24-02
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines 5@60' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

[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

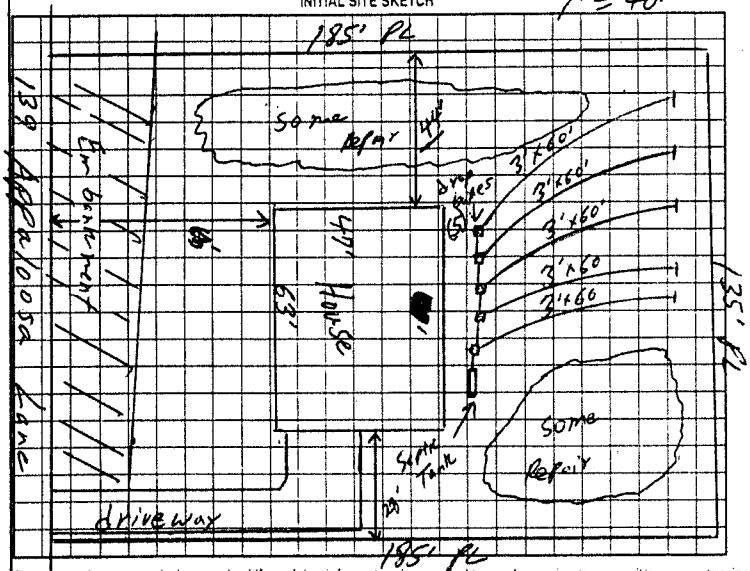
[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other
No. Bedrooms 3 No. Bathrooms 3 No. Employees ____

Water Supply: [X] Individual [ ] Public [ ] Community

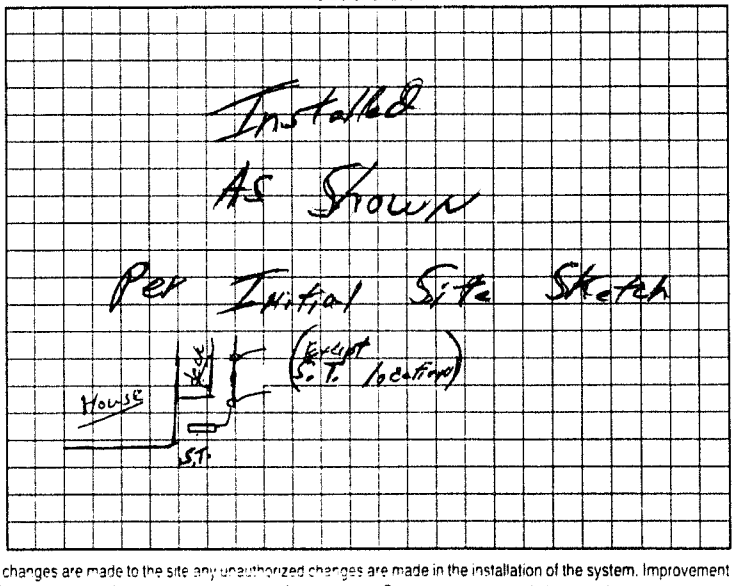
Comments/Conditions: ① Install on Contour ② use 25% Reduction System ③ maintain proper setbacks

Comments/Conditions: Taff-Tite filter Installed - S.T. Market Installed Installed 49 Infiltrator Chambers

INITIAL SITE SKETCH 1" = 40'



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: Jay McMillan date 6-7-02 Installed by Steve Jordan

Improvement Permit by: William O. Johnson date 6/7/02 Operation Permit by: William O. Johnson date 9/18/02

Authorization to Construct by: William O. Johnson date 6/7/02 Existing System Inspection by: ____ date ____

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