IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 150325 PIN# 4750709346 DATE 5-21-08

OWNER OR APPLICANT Pilot Development Adams Homes PHONE: Business 704-942-1250 Home Kathleen S+ME

ADDRESS 132 Joe V Knox Ave Suite 102 Mooresville NC 28117

LOCATION 115, TR Shepherds, TL Houston, TL Colonial Congress, TL Mills Plantation, on L

SUBDIVISION Georgia Mills BLOCK / SECTION ____ LOT 31 LOT AREA 1.72 Ac SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .25

Septic Tank: 1000 Gallons: STB ____ Date ____

Pump Tank: 1000 Gallons: PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 640' Linear Feet 320'

No Lines 4 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth — ☐ Gravity ☒ Pressure

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

System Description: LP PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☒ Yes ☐ No

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

No. Bedrooms 4 No. Persons ____ No. Employees ____

Water Supply: ☒ Individual ☐ Public ☐ Community

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

Comments/Conditions: Place well where shown to meet Set backs

Comments/Conditions: CHECKED OFFSITE SUPPLY LINES 3-19-10 JA
STUB UP PAINTED BLUE

INITIAL SITE SKETCH

SEE Plan from S+ME

AS BUILT SKETCH

INSTALLED 72 PANELS

30 @ 75'	225
1 @ 50'	50
1 @ 45'	45
	320

CHECKED LINES & TANKS 9-21-10
&
CNB

PUMP TO SMALL 9-21-10

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 5/27/08

Improvement Permit by: ____ REHS date 5-21-08

Authorization to Construct by: ____ date 6-9-10

Installed by: ROWAN SEPTIC & DITCHING

Operation Permit by: ____ date 10-25-10

Existing System Inspection by: ____ date ____

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