IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 094593 PIN# 4754 83 8987 DATE 1/19/01

OWNER OR CONTRACTOR James Corry PHONE: Business — Home (704) 872-0698

ADDRESS 198 E. Greensboro St Statesville, N.C. 28625

LOCATION East on Greensboro St. @ on Corry Drive at end.

SUBDIVISION — BLOCK / SECTION — LOT 2 LOT AREA 1.10 Ac. SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 10/12 Date 1-7-01
Pump Tank: — Gallons; PT — Date —
Pump Make: — Model — Serial No. —
Nitrification Field: No Fields 1 Square Feet 1,200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

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

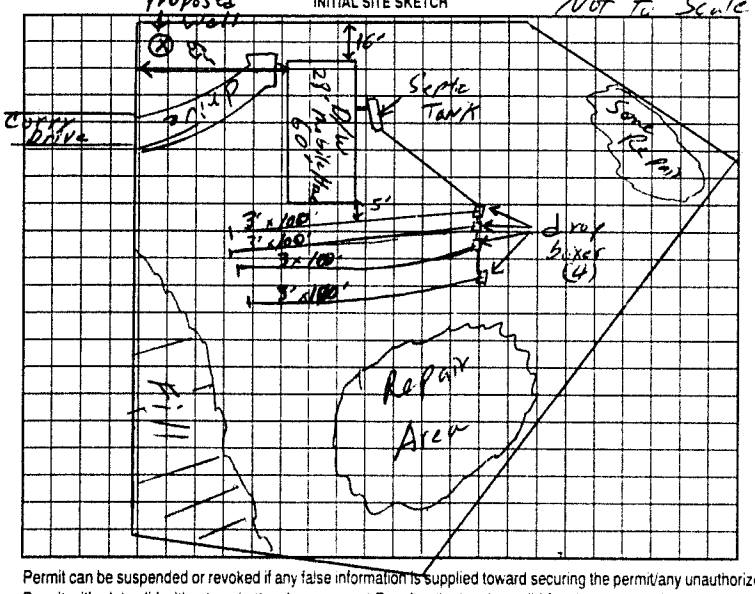
[ ] House/Mod. Home No. Bedrooms 3
[X] Mobile Home No. Bathrooms 2
[ ] Business No. Employees —
[ ] Other —

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

Comments/Conditions: ① Do not install when wet ② Install Rock on Contour ③ Keep 5' from House ④ Install max depth of Rock 30"

Comments/Conditions: - poly/pak Filter Installed - Septic tank marker Installed

INITIAL SITE SKETCH Not to Scale



AS BUILT SKETCH

Installed as Shown

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 2-19-01 Installed by: A-1 Backhoe

Improvement Permit by: William O. Johnson RSI date 1/19/01 Operation Permit by: William O. Johnson date 3/8/01

Authorization to Construct by: William O. Johnson RSI date 1/19/01 Existing System Inspection by: — date —

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