IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 155.00 Paid MOORESVILLE 704-664-5281 3:30

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

PERMIT# 095665 PIN# ~~4760-17-5284~~ 4760-15-1799 DATE 2/7/02

OWNER OR CONTRACTOR Joel R. Howard PHONE: Business _____ Home 704-892-3152

ADDRESS 18400 Shearer Rd. Davidson, NC. 28036 510 Weathers Creek

LOCATION 115 N TR Shinnville Rd. TL Weathers Creek on (L) just past Hudson Ln. on Beedie Ln.

SUBDIVISION County View Estates BLOCK / SECTION #3 LOT 16 LOT AREA 7 1AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 2-5-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 300 Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth —

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI
System Description: GRAV-EZFLOW-CH PLASTIC
Repair System Description: SAME
Maintenance Agreement Required: [ ] Yes [X] No

[ ] House/Mod. Home No. Bedrooms 3
[X] Mobile Home No. Bathrooms 2
[ ] Business No. Employees _____
[ ] Other _____
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

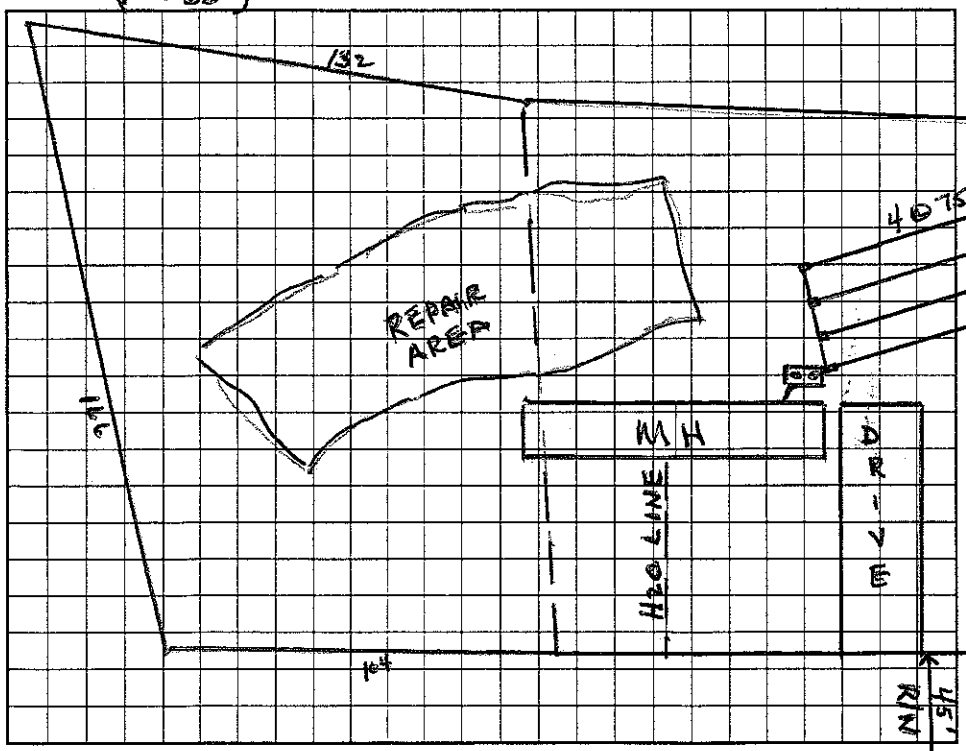
Water Supply:
[ ] Individual
[ ] Public
[X] Community

Comments:/Conditions:

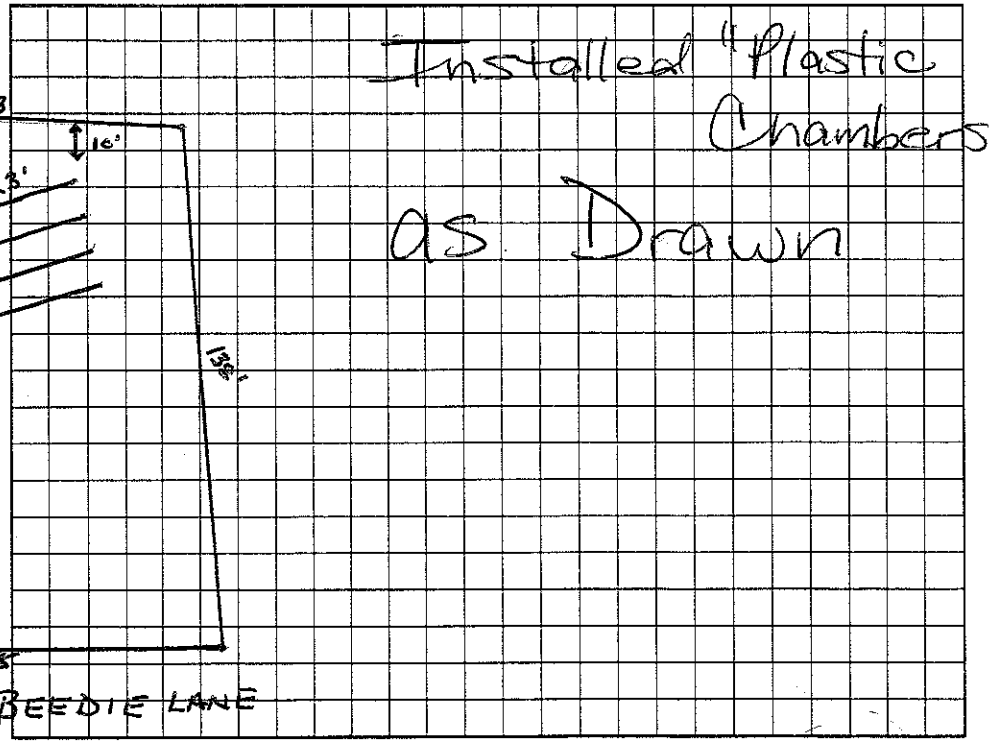
Comments:/Conditions:

(1" = 50')

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: Joel Howard date 2/11/02 Installed by: Bob's Backhoe RS

Improvement Permit by: Wesley Sparks RS. date 2/7/02 Operation Permit by: Maria H. Dotson date 3/10/03

Authorization to Construct by: Wesley Sparks RS date 2/7/02 Existing System Inspection by: _____ date _____

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