IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21062

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

PIN # 4761492454

APPLICANT: Michael Ryan Homes Inc. APPLICANT ADDRESS: 10700 Mallard Creek Rd.

SITE ADDRESS: 132 ~~Northlake Dr.~~ Mountain Island Dr. - Stub PHONE: 704-547-9000 ALT. PHONE: 980-216-0652

SITE DIRECTIONS: Hwy 70E TR Bethesda TL Northlake Dr.

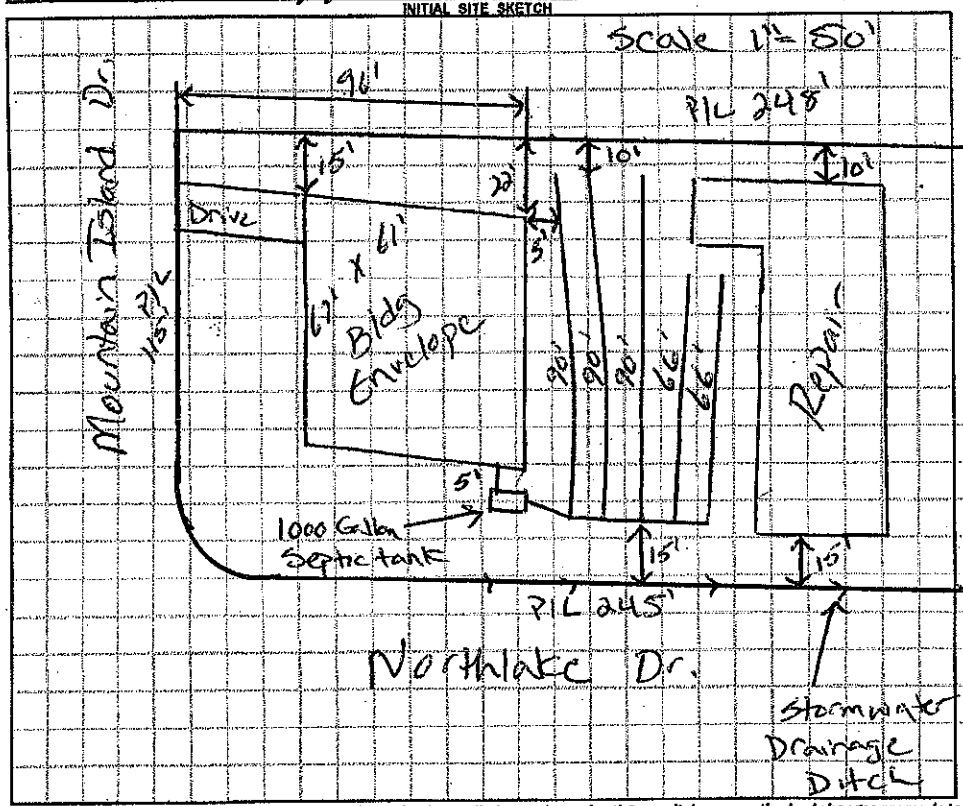
SUBDIVISION: Northlake SECTION: PH 1 LOT # 43 LOT AREA: 0.68 acres DESIGN FLOW: 480 gpd L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB	799	Date	4-21-16	☑ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms	4	Water Supply	
Pump Tank	N/A	(gal)	PT	N/A	Date	N/A	System Description:	25% Reduction			☐ Business	No. Persons	8	☐ Private	
Pump Make	N/A	Model			Serial #		Repair System Description:	30% Reduction			☐ Other	No. Employees		☑ Public	
# Nitrification Fields	1	# Lines	5		Linear Ft:	402	Maintenance Agreement Required:	☐ YES	☑ NO		☑ Slab	☐ Crawl Space		☐ Community	
Trench Width	36"	Max. Trench Bottom Depth	36"		Gravel Depth			☑ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing		

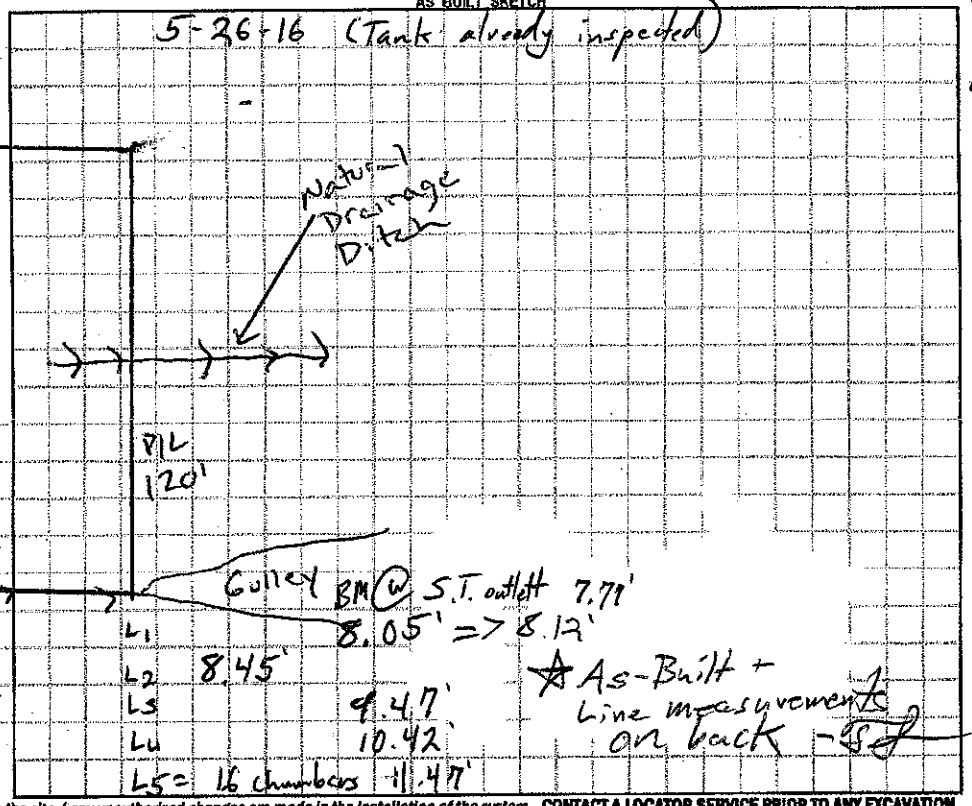
Comments / Conditions: IMPROVEMENTS ONLY: Submit Floor Plan prior to issuance of CA: Install a 25% Reduction system on contours with serial distribution. ~~**]**~~ Install Trench Bottoms @ 36" ~~**]**~~

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23
23
16
16

INITIAL SITE SKETCH



AS BUILT SKETCH



★ As-Built + Line measurements on back - SF

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 6/3/15 Installed by: Marty Tucker

IMPROVEMENT PERMIT by: Justin Henderson Date: 6/3/15 OPERATION PERMIT by: Tom Church Date: 5-26-16

AUTHORIZATION TO CONSTRUCT by: Justin Henderson Date: 1/19/16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK

Mtn Island Drive
House
Conc Slab
Post
18'
8'
7'
6'
8'
18'
24'
12'
14'
90
90
35'
35'
84'
96'
110'
126'
142'
LP