IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 130508 PIN# 4761501222 DATE 8-29-05

OWNER OR CONTRACTOR Gra-Con Luxury Homes PHONE: Business 828 478-9699 Home

ADDRESS P.O Box 602 Sherrills Ford NC

LOCATION E. Hwy 115/21 TR Shinnville Rd TL Brawley Rd TR Fairhaven on left

SUBDIVISION Fairhaven BLOCK / SECTION 1 LOT 4 LOT AREA .55 Acre SITE CLASS. P5 DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 8-8-05

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 315 Linear Feet 945

No Lines 5 Trench Width 36" Max Trench Bottom Depth 3 Gravel Depth N/A

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

System Description: Gravity - 25% Reduction

Repair System Description: Pump-Panel Blk

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Bathrooms ____ No. Employees ____

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

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Septic permit approved for attached plan, designed by Rollans Soil & Environmental Services.

Comments:/Conditions:

INITIAL SITE SKETCH

See attached plan & drawing for Septic System Layout

AS BUILT SKETCH

Installed essentially as Drawn Used EZ Flow

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: Howard Fernandez date 8/29/05

Improvement Permit by: Marvin H. Dotson RS date 8/29/05

Authorization to Construct by: Wesley Sparks RS date 10/3/05

Installed by: R&H RS

Operation Permit by: Marvin H. Dotson RS date 4/12/06

Existing System Inspection by: ____ date ____

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