IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122365 PIN# 4764995398 DATE 05/19/06

OWNER OR CONTRACTOR ROBERT SAUNDERS PHONE: ~~Home~~ Business 336-973-4481 ~~Work~~ Home 336-973-8447

ADDRESS 2938 GLADYS FORK RD. FERGUSON, NC 28624

LOCATION HWY 64 E, (R) NEW SALEM CH. RD., (R) POTTERY DR., (R) DRIVEWAY

SUBDIVISION STOWALL EST BLOCK / SECTION — LOT 3 LOT AREA 12.8 Ac. SITE CLASS PS DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons; STB 825 Date 5/10/07
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@100' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

[X] New System [ ] Repair System Type: I, II, III, IV, V, VI, (OTHER)
System Description: CONVENTIONAL, GRAV, - OR ACCEPTED SYSTEM
Repair System Description: CONV. OR OTHER APP., GRAV. SYSTEM
Maintenance Agreement Required: [ ] Yes [X] No

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

[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

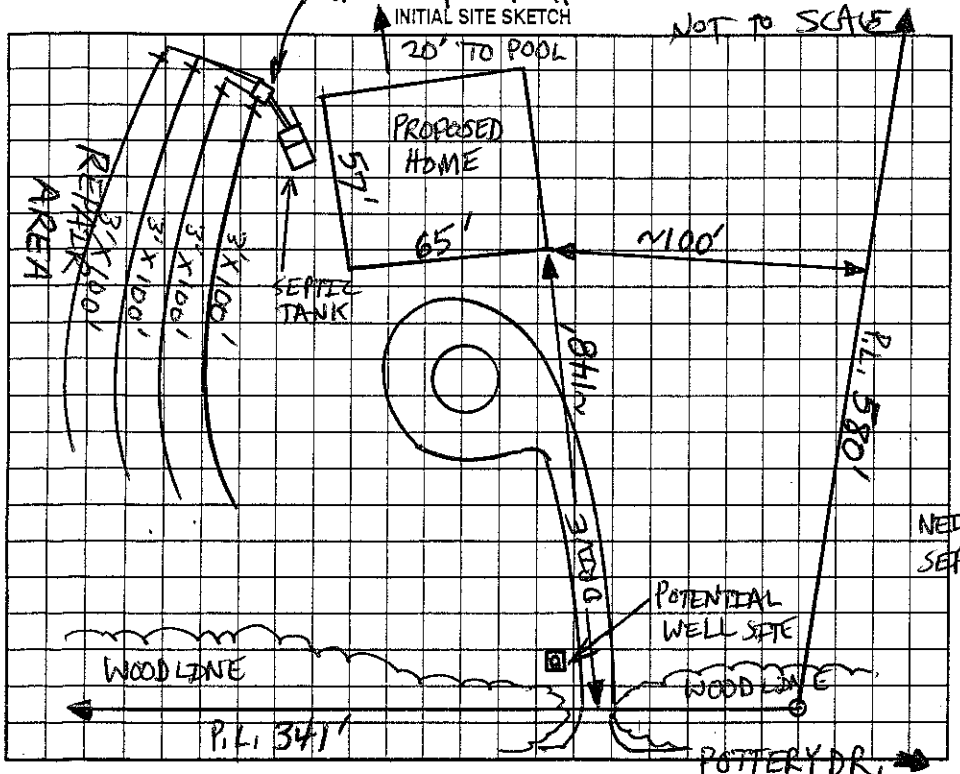
Water Supply: [X] Individual [ ] Public [ ] Community
WELL

Comments:/Conditions: "AN ACCEPTED SYSTEM MAY ALSO BE USED."

EFFLUENT SPLITTER (SUCH AS "ZOELLER TRU-FLO")

Comments:/Conditions: Blue Lift-Tite Septic Check

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: Robert L. Saunders date 6/6/06 Installed by: Ridge Septic

Improvement Permit by: STEVE HENDRICK date 5-23-06 Operation Permit by: [signature] date 6-19-07

Authorization to Construct by: STEVE HENDRICK date 5-23-06 Existing System Inspection by: ____ date ____

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