CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 102805 PIN# 4765-36-7251 DATE 10-19-01

OWNER OR CONTRACTOR NYSTROM HOMES, LLC PHONE: Mobile/Business 704-906-6265 Home 704-896-9886

ADDRESS 18716 W CATAWBA AVENUE, CORNELIUS, NC 28031

LOCATION 64 E, L RIVER HILL, 1/3 mile on Left

SUBDIVISION LINDA KNOX BLOCK / SECTION LOT 2 LOT AREA 100'x 200' SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.3

Septic Tank: 1000 Gallons: STB 1007 Date 10-22-01
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet EQ x 1200 Linear Feet 300'
No Lines 3 x 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I. II (III) IV. V. VI
System Description: GRAY 25% REDUCTION
Repair System Description: GRAY 25% RED
Maintenance Agreement Required: ☐ Yes X No

X House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

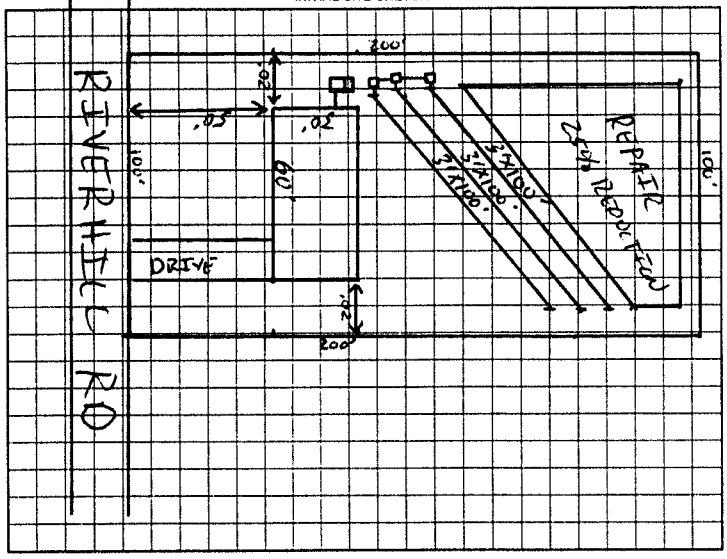
Water Supply: ☐ Individual X Public ☐ Community

Comments/Conditions: (1) MAINTAIN SETBACKS (2) INSTALL LINES ON CONTOURS

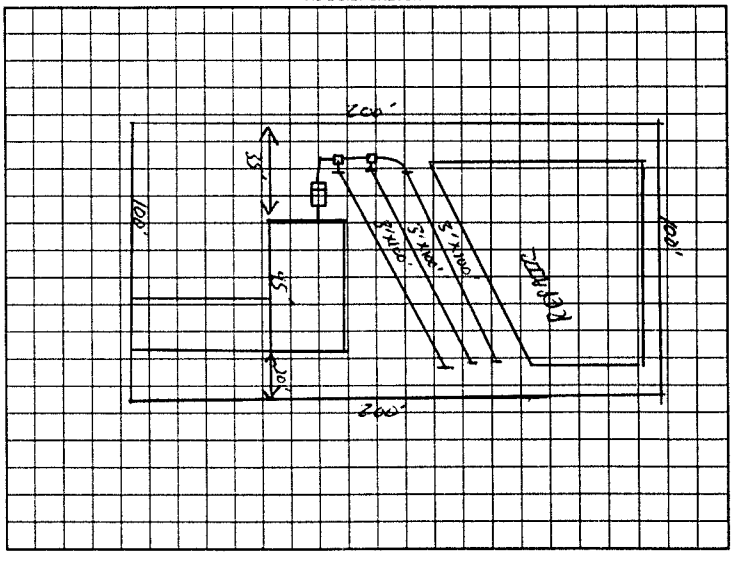
Comments/Conditions: POLYLOK FILTER & MARKER INSTALLED AS SHOWN

3545 2c

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: [signature] date 10/20/01 Installed by: WAYNE CLONTZ

Improvement Permit by: [signature] date 10-19-01 Operation Permit by: [signature] date 2-22-02

Authorization to Construct by: [signature] date 10-19-01 Existing System Inspection by: date

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