IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 118385 PIN# 4765-56-9444 DATE 2-17-09

OWNER OR CONTRACTOR WAYNE HOMES MID-ATLANTIC LLC PHONE: Business 704-872-8989 Home 336-782-9262

ADDRESS 130 VICTORY LANE, STATESVILLE, NC 28677

LOCATION US 64 E, TL RIVER HILL ROAD, TR OAK HAVEN DRIVE, 3RD LOT ON LEFT PAST SHADY STREAM DRIVE

SUBDIVISION COUNTRY WOODS BLOCK / SECTION I LOT 90 LOT AREA 0.695 ACRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 12-30-03
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ. T= 1440 Linear Feet 360
No Lines FIVE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 25% REDUCTION, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No (STANDARD)

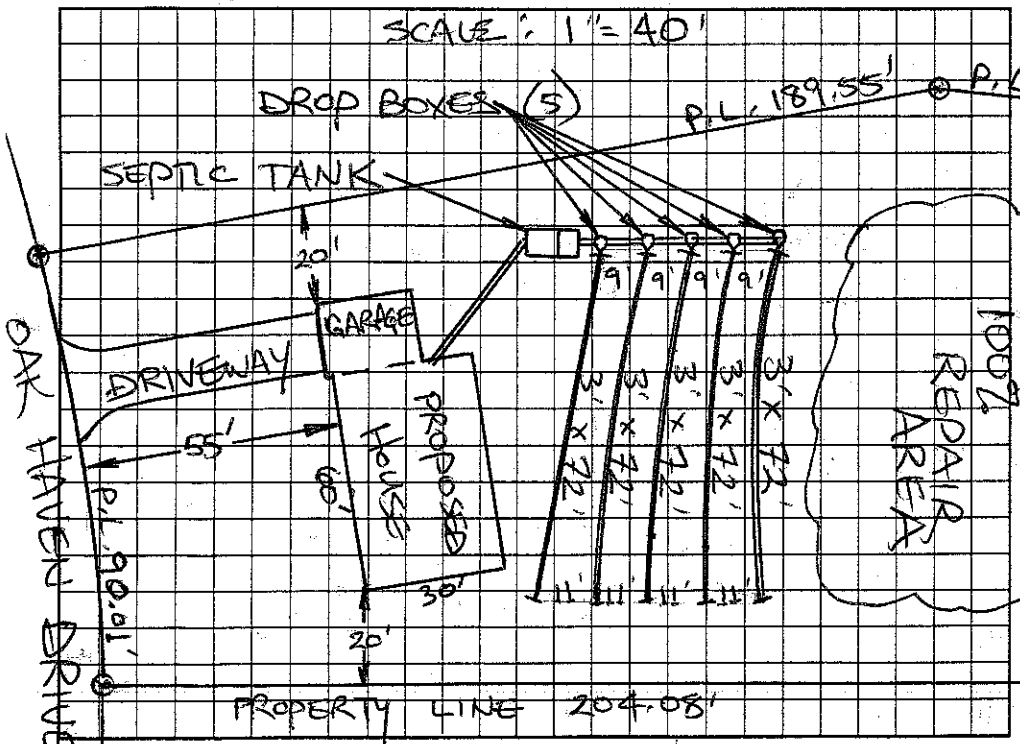
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

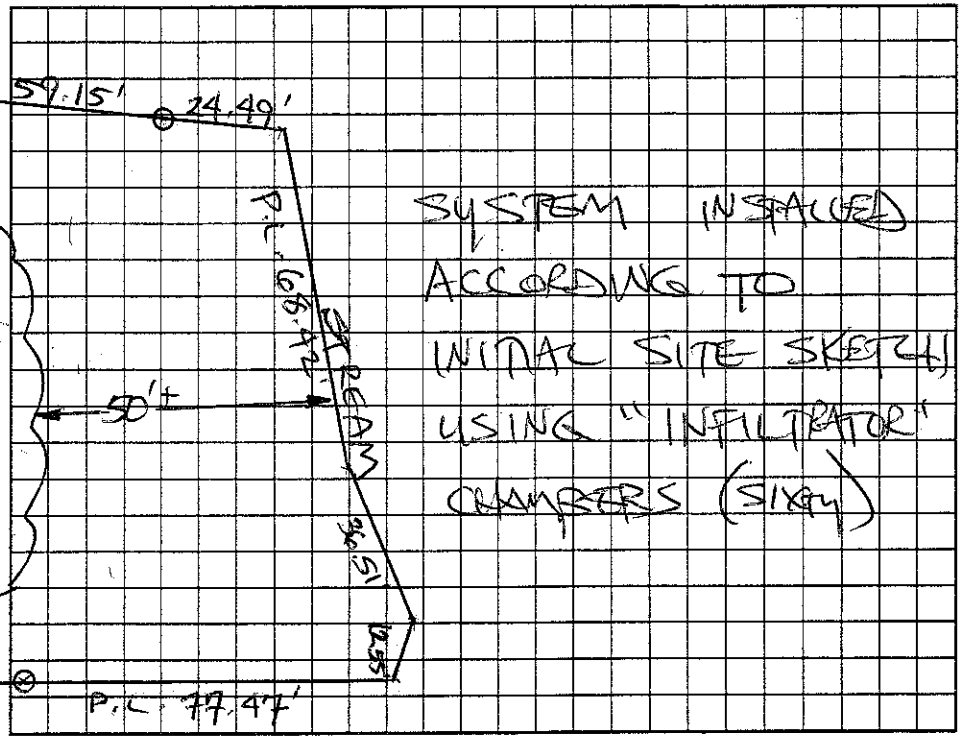
Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "INFILTRATOR" FILTER

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: Scott Cushing date 2-18-04 Installed by: C & S GRADING

Improvement Permit by: STEVE HEDRICK date 2-17-09 Operation Permit by: STEVE HEDRICK date 6-3-04

Authorization to Construct by: STEVE HEDRICK date 2-17-09 Existing System Inspection by: ____ date ____

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