IREDELL COUNTY HEALTH DEPARTMENT

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

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

(21)

PERMIT# 115700 PIN# 4775-01-9307 DATE 9-22-03

OWNER OR CONTRACTOR WAYNE HOMES MID-ATLANTIC, LLC PHONE: Business 704-872-8989 Home 704-872-0271

ADDRESS 130 VICTORY LANE, STATESVILLE NC 28625

LOCATION US 64 EAST TR NEW SALEM ROAD, TR LYNNGAYLE DR, TR VERNA DRIVE, 1ST LOT ON LEFT

SUBDIVISION CAMPBELL GLEN BLOCK / SECTION ____ LOT 31 LOT AREA 0.73 ACRE SITE CLASS PS PS DESIGN FLOW 480 L.T.A.R. 0.25/SQ/FT

Septic Tank: 1000 Gallons; STB 794 Date 8-4-03

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet FROM 1920 Linear Feet 480

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: 50% REDUCTION LOW PRESSURE

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 4 No. Bathrooms 3 No. Employees ____

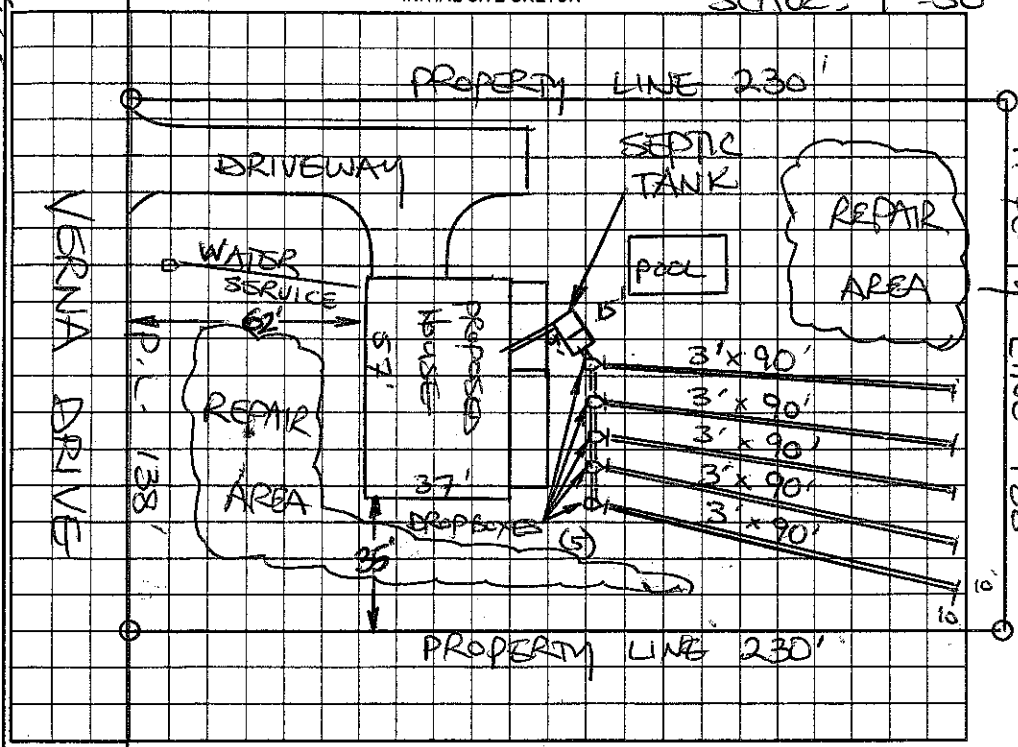
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions: INSTALL 25% REDUCTION SYSTEM ON CONTOUR, MINIMUM 5' FROM FOUNDATION, 10' FROM PROPERTY LINE, 15' FROM FUTURE POOL SITE

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "ZABEL" FILTER. ② SYSTEM INSTALLED DURING PERIOD OF WET SOIL CONDITIONS.

INITIAL SITE SKETCH SCALE: 1"=50'



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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 Cushion date 9-23-03

Improvement Permit by: STEVE HEDRICK date 9-22-03

Authorization to Construct by: STEVE HEDRICK date 9-22-03

Installed by: TUCKERS HAULING & GRADING

Operation Permit by: STEVE HEDRICK date 12-16-03

Existing System Inspection by: ____ date ____

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