IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 131666 PIN# 4863 64 6583 DATE 10-24-05

OWNER OR CONTRACTOR ERIC WARD PHONE: Business 704 622 6929 Home 704 528 6649

ADDRESS 745 Eagle Mills Rd.

LOCATION I-77 to exit 65 (R) onto 901 then (L) onto Eagle Mills cross Hunting Creek - lot is on the left

SUBDIVISION n/a BLOCK / SECTION ____ LOT ____ LOT AREA 1.61 Acre SITE CLASS P5 DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 5-30-06
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 400
No Lines 3 Trench Width 3 Max Trench Bottom Depth 36" Gravel Depth ____

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: 25% Reduction System
Repair System Description: 25% Reduction System
Maintenance Agreement Required: ☐ Yes ☒ No

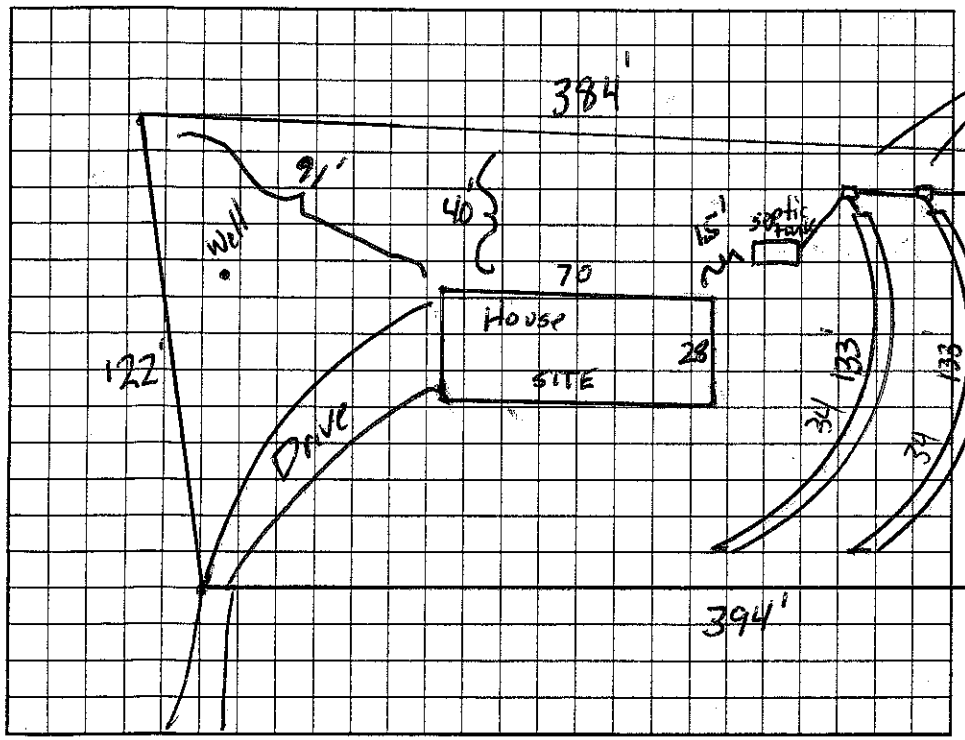
☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms 4
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

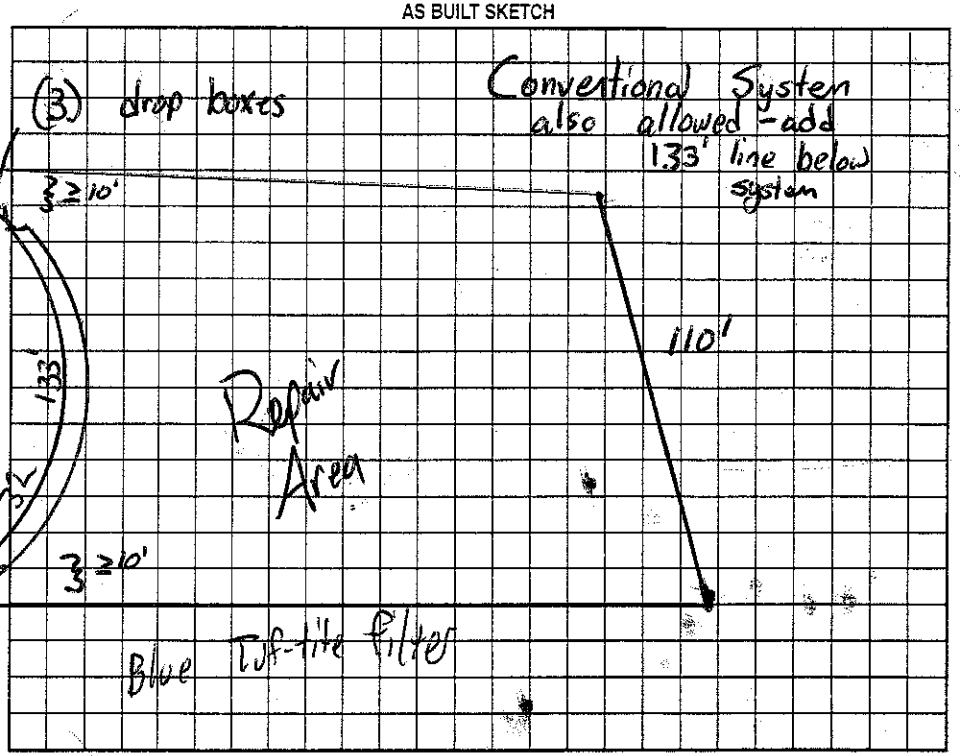
Comments:/Conditions:

Comments:/Conditions: Approved 76'4 28 4 BEDROOM HOUSE PLAN. SLIDE/PLACE HOUSE ±ten 6' toward 122' LOT LINE SO system will be unaffected.

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: Ed Osbeque date 1-30-2006 Installed by: Andy Daniels

Improvement Permit by: James Lewis date 10-24-05 Operation Permit by: James Lewis date 7-18-06

Authorization to Construct by: James Lewis date 6-14-06 Existing System Inspection by: ____ date ____

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