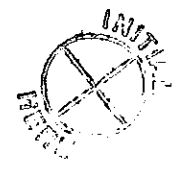


LINCOLN COUNTY HEALTH DEPARTMENT

302 NORTH ACADEMY STREET, SUITE B - LINCOLNTON, N.C. 28092 - PHONE (704)736-8426-FAX (704)736-8427

Application Type: EN IMPROVEMENT APPLICATION Date: 7/20/11
 Permit # 10-0000210 P.M. 5070-00-22 -2017 Parcel ID: 81898
 County: HEALTH DEVELOPMENT CO (704) 477-1183
 Office: HEALTH DEPT 16 DENVER RD 28037



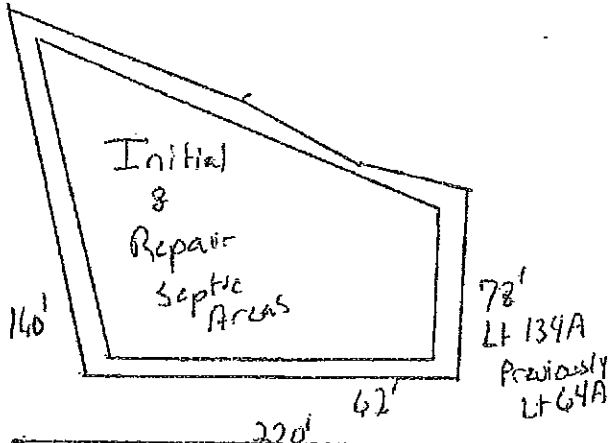
005

Directions to property: GRASSY CREEK RD
KILYAN CROSSING LOT 134 HWY 150 E RIGHT
GRASSY CREEK, LEFT INTO SUB

Residence: Y No. of Bedrooms: 4 Water Supply: PUBLIC

IMPROVEMENT PERMIT

- REPAIR (SEPTIC/WELL) LOT DENIED
- NEW WELL/REPLACEMENT ABANDONMENT PERMIT
- SEPTIC CHANGE



FINAL COMPLETION

- OP WELL COC RC
- ABANDONMENT (RC VALID FOR 60 DAYS)

-New applicants must reapply for an authorization to construct a well permit, if applicable, at the current fee in order to obtain a building permit and have septic system and well installed.
 -New applicant must remark all structures and property lines as marking policy states before our office revisits the site to issue the authorization to construct permit.

CONSTRUCTION AUTHORIZATION

TYPE OF SYSTEM IP

TANK SIZE _____ ABSORPTION AREA _____

TRENCH (Width xLengthxDepth) _____

NUMBER OF TRENCHES _____ TRENCH SPACING _____

AGGREGATE DEPTH _____ PRODUCT Only

DISTANCE BETWEEN WATER SUPPLY AND SEPTIC _____ (IN FEET)

DESIGN FLOW 480 GPD LTAR _____

CONDITIONS DO NOT INSTALL WHEN WET

TANK MANUFACTURER _____

TANK SIZE _____ ABSORPTION AREA _____

TRENCH (Width xLengthxDepth) _____ NUMBER OF TRENCHES _____

AGGREGATE DEPTH _____ PRODUCT _____

DISTANCE BETWEEN WATER SUPPLY AND SEPTIC _____ (IN FEET)

INSTALLER (SEPTIC) _____

CONTRACTOR (WELL) _____

CONDITIONS _____

AUTHORIZED AGENT Duan Glass
 DATE: 6/2/11

AUTHORIZED AGENT _____
 DATE: _____

IMPROVEMENT PERMIT: THIS IMPROVEMENT PERMIT IS SUBJECT TO REVOCATION IF SITE PLANS OR THE INTENDED USE ARE CHANGED FROM THOSE SHOWN ON PERMIT. CHANGES FROM THE ABOVE PERMIT REQUIRED HEALTH APPROVAL. INSTALLER SHALL BE REQUIRED TO HAVE AN IMPROVEMENT PERMIT AND CONSTRUCTION AUTHORIZATION (VALID FOR 60 MONTHS FROM DATE OF IP) BEFORE INSTALLING THE ABOVE SYSTEM.

FINAL COMPLETION: FINAL COMPLETION APPROVAL OF THIS SYSTEM SHALL INDICATE THAT THE SYSTEM HAS BEEN INSTALLED IN ACCORDANCE WITH STATE REGULATIONS, BUT IN NO WAY SHOULD BE TAKEN AS A GUARANTEE THAT THE SYSTEM WILL FUNCTION SATISFACTORY FOR ANY GIVEN TIME.