IREDELL COUNTY HEALTH DEPARTMENT

P.L. 190 (CI) THIS PERMIT REPLACES PREVIOUS EXPIRED PERMIT #067700

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

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

PERMIT# 134947 PIN# 3774-89-6364 DATE 8-4-2006

OWNER OR APPLICANT DAVID W. BUMGARDNER PHONE: Business 704-609-5729 Home 704-655-4283

ADDRESS 4174 TEMPLE HILL CH. RD GRANITE FALLS, NC 28630

LOCATION I-40 W, TR SHARON SCHOOL RD TL STEWART ROCK, TL FULBRIGHT RD, 1ST LOT ON LEFT

SUBDIVISION RIVERWALK BLOCK / SECTION IX (9) LOT 6 LOT AREA 6.223 ACRES SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 gpd/ft²

Septic Tank: ~~1000~~ 1550 Gallons; STB 268 Date 10-15-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ to 16000 Linear Feet 400

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 25% REDUCTION, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 4 No. Persons ____ No. Employees ____

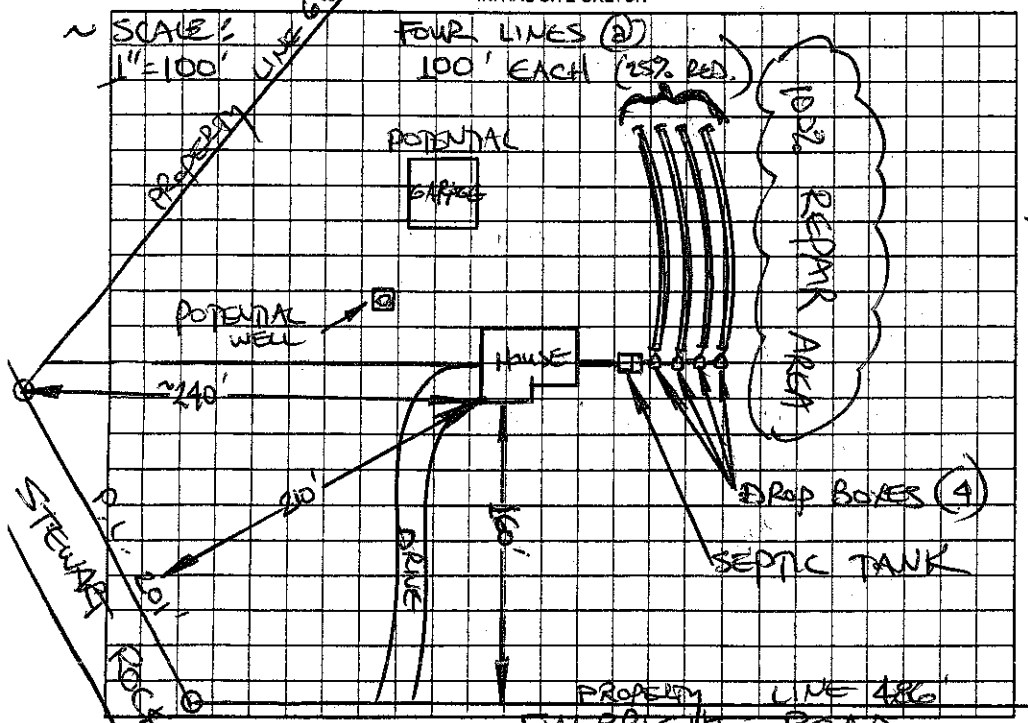
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

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

Comments:/Conditions: (1) KEEP SYSTEM MINIMUM 100' FROM WELL (2) INSTALL 25% REDUCTION SYSTEM ON CONTOUR (3) CONTACT HEALTH DEPT. AFTER CLEARING & PRIOR TO INSTALLATION TO FLAG-OUT SYSTEM

Comments:/Conditions: ~~Mike~~ Files Brown

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 8-4-06 Installed by: C & J Backhoe

Improvement Permit by: STEVE HEDRICK date 8-4-2006 Operation Permit by: [signature] date 12-11-07

Authorization to Construct by: STEVE HEDRICK date 8-4-2006 Existing System Inspection by: _____ date _____

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