IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 078569 PIN# 3785 33 9975 DATE 1-12-99

OWNER OR CONTRACTOR WILLIAM CAMPBELL PHONE: Business 871-0505 Home 585-6161

ADDRESS 276 COUNTY LINE ROAD, STONY POINT NC 28678

LOCATION I-40 W, TR SHARON SCHOOL RD, TR COUNTY LINE ROAD, 0.7 MILE ON RIGHT AT BOX #276

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.04 ACRES SITE CLASS. 1PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 375 Linear Feet 125

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: ☐ I, ☑ II, ☐ III, ☐ IV, ☐ V, ☐ VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth 12" ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

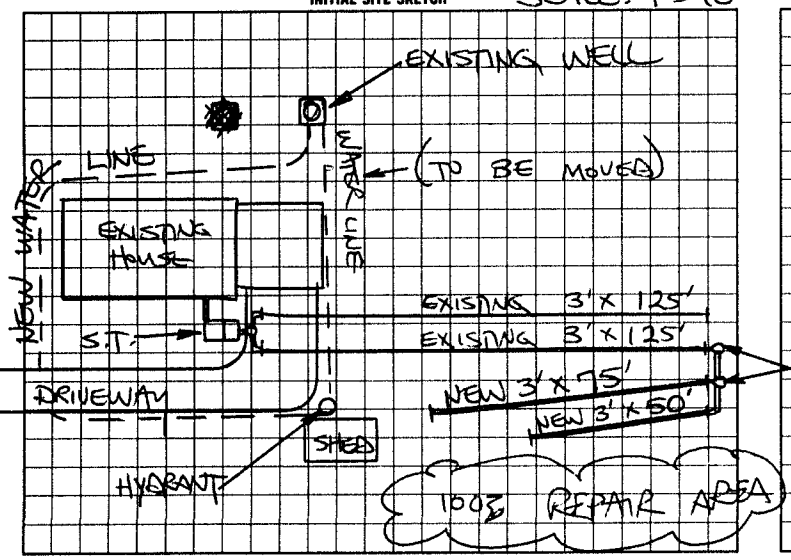
Water Supply: ☑ Individual ☐ Public ☐ Community

WELL

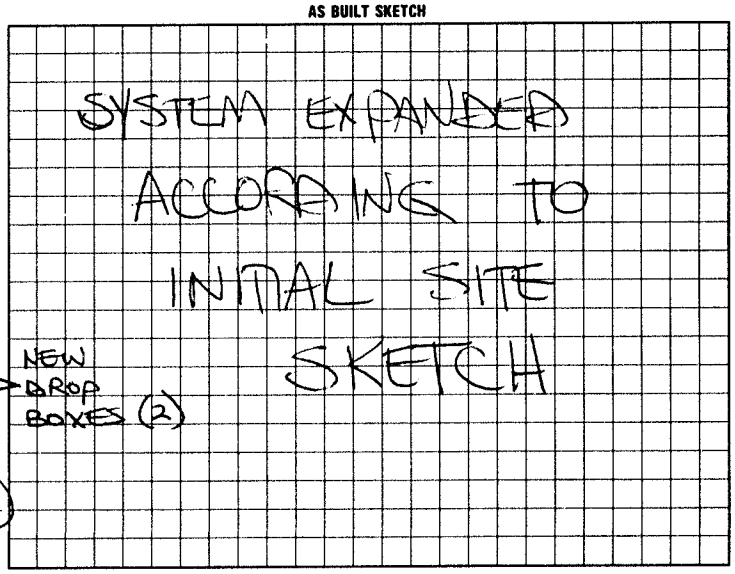
Comments:/Conditions: ① INSTALL NEW LINES AS FLAGGED ② RELOCATE EXISTING WATER LINE TO MAINTAIN MINIMUM 10 FEET HORIZONTAL SEPERATION FROM SYSTEM

Comments:/Conditions:

INITIAL SITE SKETCH SCALE: 1"=40'



AS BUILT SKETCH



I understand that this 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: W. Scott Campbell date 1-12-99

Improvement Permit by: STEVE HENRICK date 1-12-99

Authorization to Construct by: STEVE HENRICK date 1-12-99

Installed by: RICK SHOOK

Operation Permit by: STEVE HENRICK date 1-19-99

Existing System Inspection by: _____ date _____

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