IREDELL COUNTY HEALTH DEPARTMENT

AUTHORIZATION TO CONSTRUCT

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

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 25159 DATE 9/30/96 TAX MAP NO. 2F-11-4-39 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR DONALD LEHEW PHONE: Business 4626 968390 Home 663-3659

ADDRESS 620 SHERWOOD DR. MOORESVILLE NC 28115

LOCATION POPLAR GROVE LOT 39 - BRAWLEY SCHOOL RD - TR POPLAR GROVE - TAWNY BARK RD ONRT

SUBDIVISION POPLAR GROVE BLOCK / SECTION ____ LOT 39 LOT AREA ____ SITE CLASS. RS DESIGN FLOW 360 GPD L.T.A.R. .36 GPD/FT

Septic Tank: 1000 Gallons; STB 825 Date 4/1/97

Pump Tank: 1000 Gallons; PT @ 47 Date 2/14/97

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 200 Linear Feet 400

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: PUMP CONVENTIONAL

Repair System Description: PUMP CHAMBERED OR SIMILAR TYPE

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

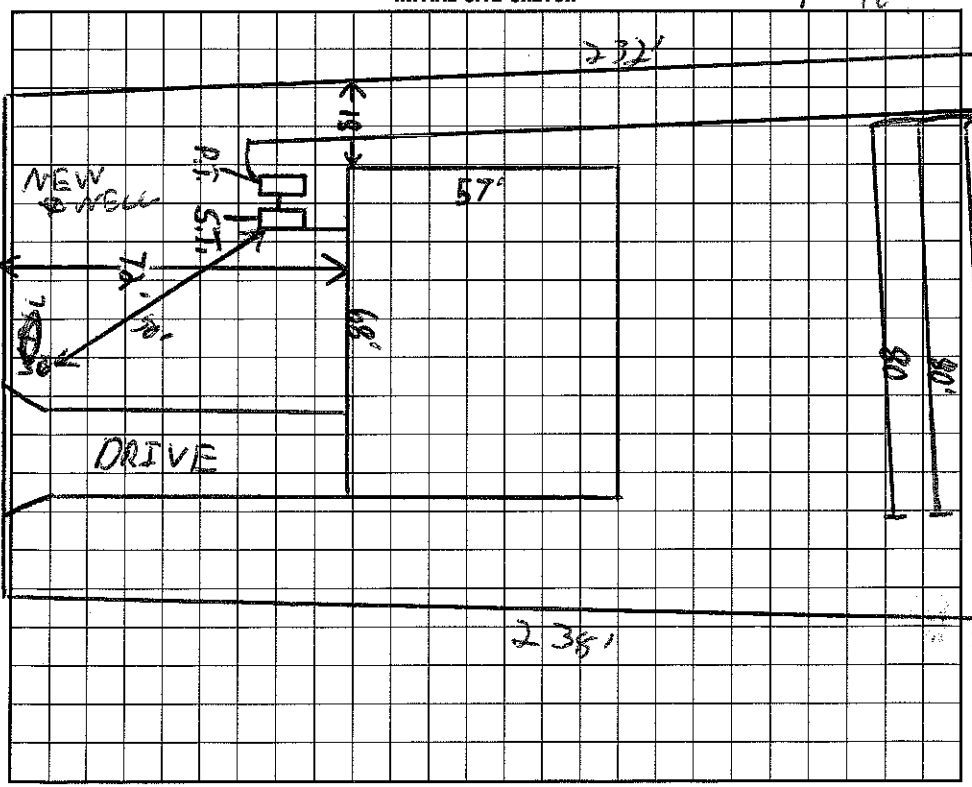
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

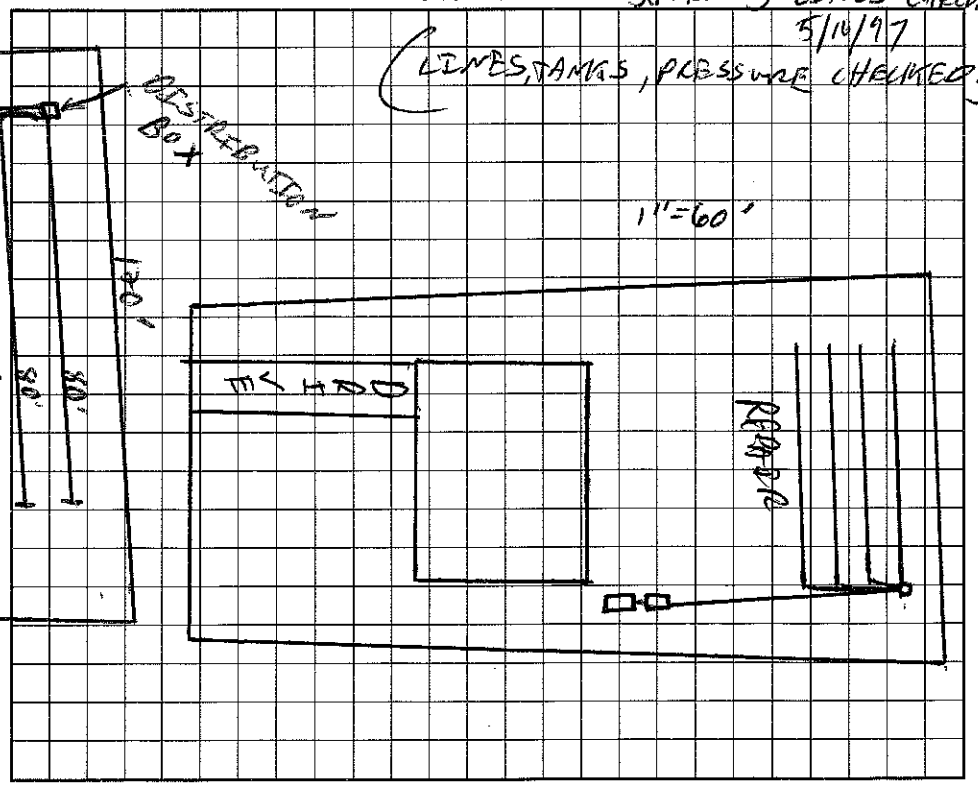
Comments: LINE MAY BE CHANGED TO 4 at 75' CHAMBERED OR SIMILAR TYPE. 50' AWAY FROM WELL.

Comments: TANKS MAY BE SWITCHED ALONG WITH DISTRIBUTION TO OTHER SIDE OF HOUSE DUE TO DRIVEWAY RELOCATION. CBF

INITIAL SITE SKETCH 1"=40'



AS BUILT SKETCH UPPER 3 LINES CHANGED 5/14/97 (LINES, TANKS, PRESSURE CHECKED.)



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.

Signed: Donald G Lehew

Improvement Permit by: C. Ray Teem EHSI date 9/30/96

~~Existing System Inspection by:~~ AUTH. TO CONSTRUCT C. Ray Teem EHSI date 9/30/96

Installed by: WAYNE KLUTZ

Certificate of Completion by: ____ date ____

Operation Permit by: C. Ray Teem date 6/10/97

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