(11.'99)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 21022 PIN# part of 2KA-41A 4637-71-1266 DATE May 11, '98

OWNER OR CONTRACTOR ~~Land Comfort~~ / Ray Short PHONE: Business _____ Home _____

ADDRESS 2247 Charlotte Hwy, Mooresville

LOCATION Brumley Sch Rd. TR OAK TREE TR Harborcrest on Right

SUBDIVISION Harborcrest BLOCK / SECTION _____ LOT 18 LOT AREA 100'X277' SITE CLASS. RS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 10/7/98

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: gravity pumped Modified

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

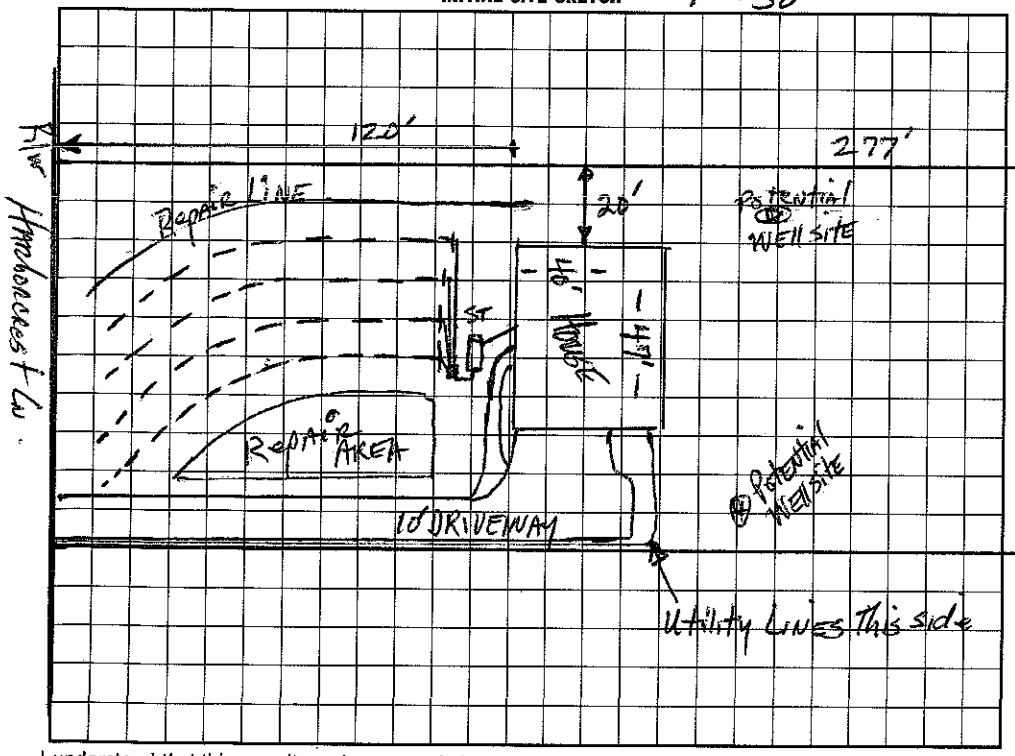
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

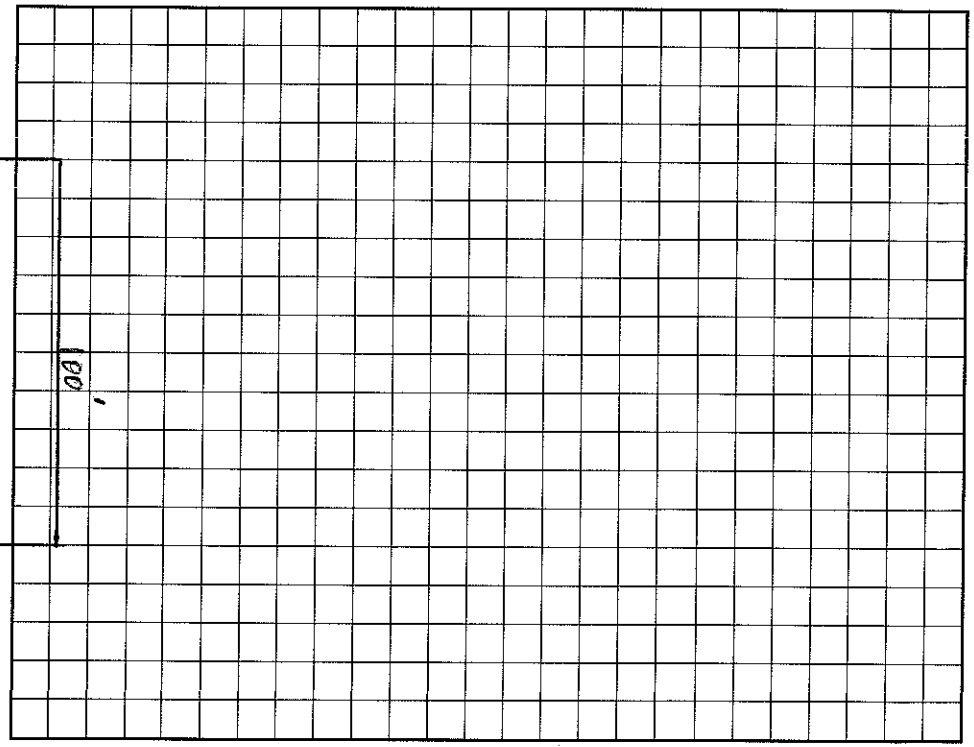
Comments:/Conditions: USE D-Box w/ spool Levelers or 3 Flow Dividers for Distribution System

Comments:/Conditions:

INITIAL SITE SKETCH 1"=50'



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: * date 5-11-98 Installed by: FJ Ewing

Improvement Permit by: David R. Thomas, RS date 5-11-98 Operation Permit by: Jeff Morgan EHS date 2/4/99

Authorization to Construct by: David R. Thomas, RS date 7-27-98 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