IREDELL COUNTY HEALTH DEPARTMENT

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

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

PROPERTY DESCRIPTION NO. ~~25367~~ 10251 3 DATE 12/19/96 TAX MAP NO. 25 4-51 pt of 4638 67 6771 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR STUMPY CREEK LLC / DAVID TAFELSKI PHONE: Business 633-6124 Home

ADDRESS 614 N MAIN ST SALISBURY NC 28144

LOCATION PERTH RD - ~~[illegible]~~ TL PAST HIDEAWAY (SEA TRAIL DR.) - ON RT 360 GPD 156 Sea Trail

SUBDIVISION HARBOR VIEW BLOCK / SECTION 7 LOT 17 LOT AREA 1.006 ac SITE CLASS. PS DESIGN FLOW ~~450 GPD~~ L.T.A. 136 GPD/FT

Septic Tank: 1000 Gallons; STB 1012 Date ~~2-14-01~~ 9-30-96

Pump Tank: 1000 Gallons; PT 17 Date 2-14-01

Pump Make: Goulds Model WE05111 Serial No. K0156338

Nitrification Field: No Fields 1 Square Feet ~~400~~ 300 Linear Feet ~~400~~ 300

No Lines ~~5 @ 80'~~ Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth N/A

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

System Description: PUMP CHAMBERED OR SIMILAR

Repair System Description: PUMP PANEL

Maintenance Agreement Required: ☐ Yes ☑ ~~No~~

☑ ~~House/Mod. Home~~ No. Bedrooms ~~4~~ 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other

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

Water Supply: ☐ Individual ☑ ~~Community~~ ☐ Public

Comments: OFFSITE INITIAL AND REPAIR SYSTEM.

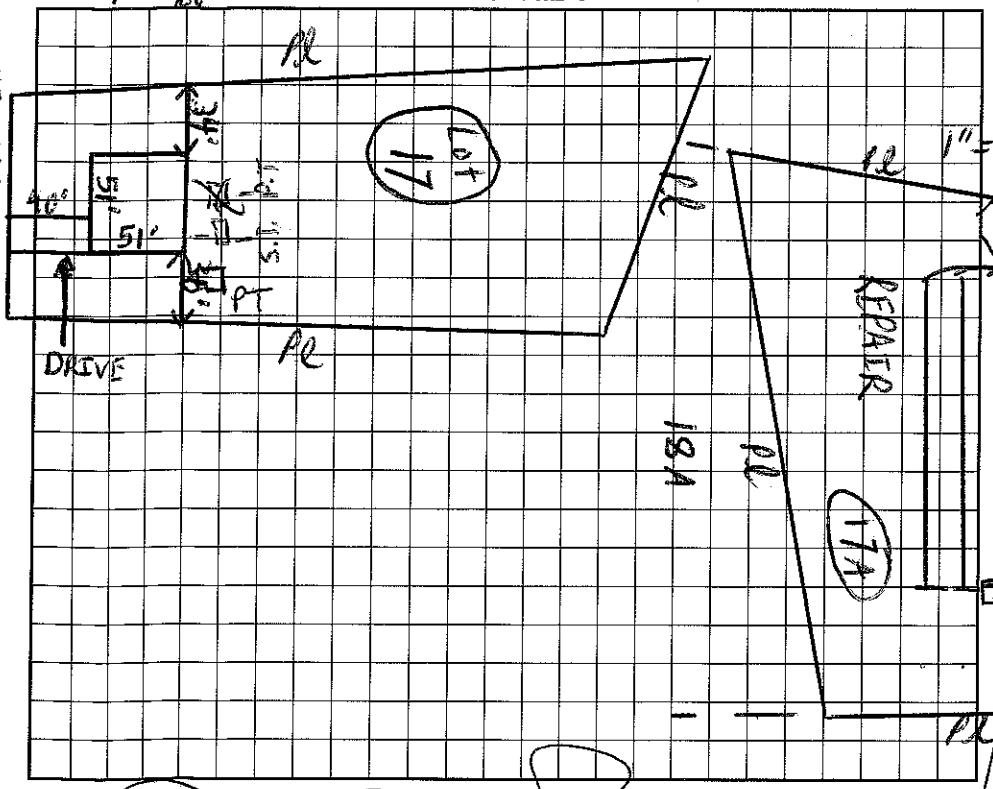
SEE MASTER PLAN FOR COLOR CODE SUPPLY LINES.

Comments: CAN INSTALL - 4 @ 75 CHAMBERS INSTEAD OF ~~4~~ 4 @ 100' FOR 3 BR

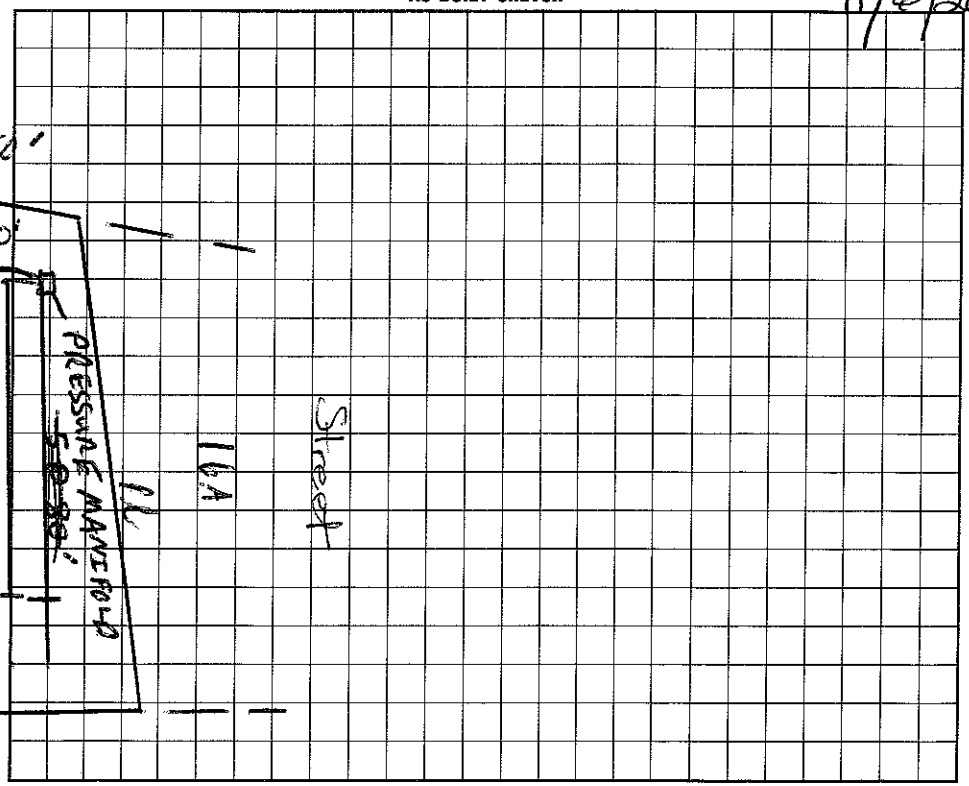
Tanks, lines & ~~filter~~ pressure checked 11/6/2001

1" = 100'

INITIAL SITE SKETCH



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.

Signed:

Improvement Permit by: C. Baby Thomas date 12/19/96

Existing System Inspection by: C. Baby Thomas RS date 8/30/01

pm ~ 30/100

Installed by: Tommy Frye

Certificate of Completion by: Marion H. Wilson RS date 12/20/01

Operation Permit by: date

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