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. 25354 DATE 2/24/97 TAX MAP NO. 25-A-51 (pt) Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR STUMPY CREEK LLC PHONE: Business 633-6124 ~~Home~~ 4638-77-5635

ADDRESS 614 N MAIN ST SALISBURY, NC 28144

LOCATION PERTH RD - TL SEA TRAIL - ON LT

SUBDIVISION HARBORVIEW BLOCK / SECTION 6 LOT 4 LOT AREA .95 AC SITE CLASS. RS DESIGN FLOW ~~440~~ 360 GPD L.T.A.R. .30 EQ/FT

Septic Tank: 1000 Gallons; STB 825 Date 8/11/97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 5 @ 80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND

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

System Description: GRAVITY ~~CHAMBERED~~ Conv

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3~~4~~

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other _____

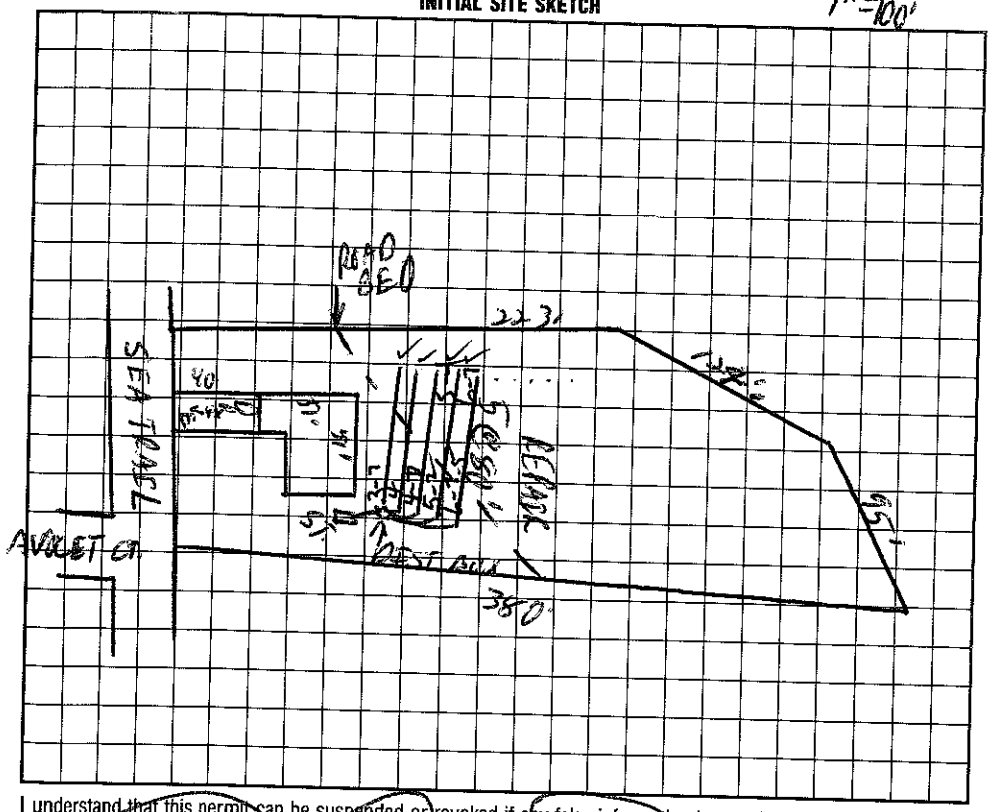
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

Comments:

Comments: ~~IP ONLY AO NOT ISSUE BUILDING~~ PERMIT.
CHANGED TO 3 BR - SYSTEM TYPE CHANGED TO CONVENTIONAL TYPE II

INITIAL SITE SKETCH 1"=100'



AS BUILT SKETCH

Installed as shown on Auth Const.

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 is valid for 60 months from date of issuance.

Signed: _____

Improvement Permit by: C. Blythe EHSI date 2/24/97

Existing System Inspection by: _____ date _____

AUTHORIZATION TO CONSTRUCT

Installed by: Rowan Septic Tank

Certificate of Completion by: Wesley Sparks RS. date 9/19/97

Operation Permit by: Wesley Sparks RS. date 9/19/97

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