ROWAN COUNTY HEALTH DEPARTMENT

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

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

(1200)

PERMIT# 066567 PIN# 4638771716 4638 78 4851

OWNER OR CONTRACTOR Stumpy Creek LLC PHONE: Business 633-6124 Home

ADDRESS 6th N. Main / Salisbury NC 28144 DATE Feb 4 '98

LOCATION Peeler Rd N. TL / TANAGER LANE on Right

SUBDIVISION Harborview BLOCK / SECTION III LOT 11 LOT AREA .62 Ac SITE CLASS PS DESIGN FLOW 360 gpd L.T.A.R. .83

Septic Tank: 1000 Gallons; STB 825 Date 10/4/98

Pump Tank: 1000 Gallons; PT 47 Date 11/3/98

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet [redacted] Linear Feet 300

No Lines 4 @ 75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: pumped-on - Modified 25% Reduction

Repair System Description: pumped Modified

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

Water Supply: ☐ Individual ☐ Public ☑ Community

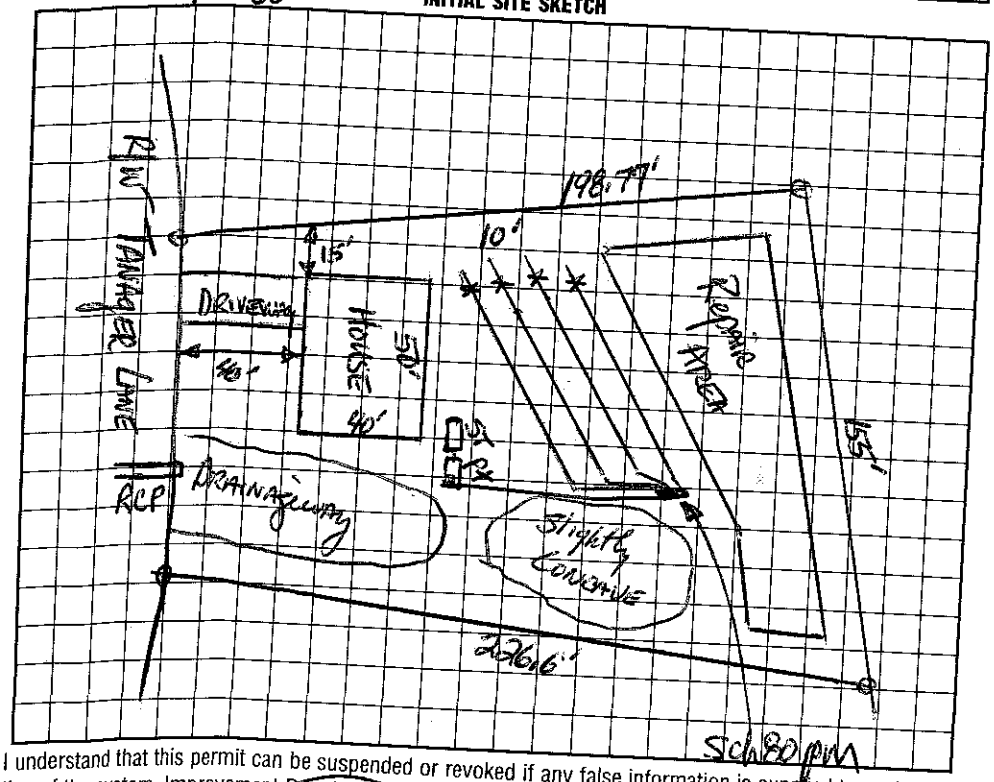
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions: ONE INSpection /observation port per LATERAL

Comments:/Conditions:

1"=60'

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. 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: _____

Improvement Permit by: _____ RS date 2-4-98

Authorization to Construct by: _____ RS date 5-19-98

Installed by: Rowan Septic

Operation Permit by: Jeff Moore date 2/4/99

Existing System Inspection by: _____ date _____

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