# IREDELL COUNTY HEALTH DEPARTMENT

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

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

(10:00)

PERMIT# 07261B PIN# ~~4637 73 4550 (pt)~~ 4638-86-9734

OWNER OR CONTRACTOR Stumpy Creek LLC PHONE: Business 633-6124 Home DATE July 31 '98

ADDRESS 614 N. Main Salisbury N.C. 28144

LOCATION Peeler Rd. N. TR into Harbor Landing Bear right immediately on left

SUBDIVISION Harbor Landing BLOCK / SECTION III LOT 57 LOT AREA 27,417 ft² SITE CLASS PS DESIGN FLOW ~~360~~ 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 3/9/99

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: 4CTS Model ____ Serial No. ____

Nitrification Field: ~~No~~ Fields 1 Square Feet ~~600~~ 900 Linear Feet ~~500~~ 300

No Lines ~~5 @ 100'~~ Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth NA

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

System Description: GRAVITY 25% Reduction

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

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

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

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees ____

☐ Other ____

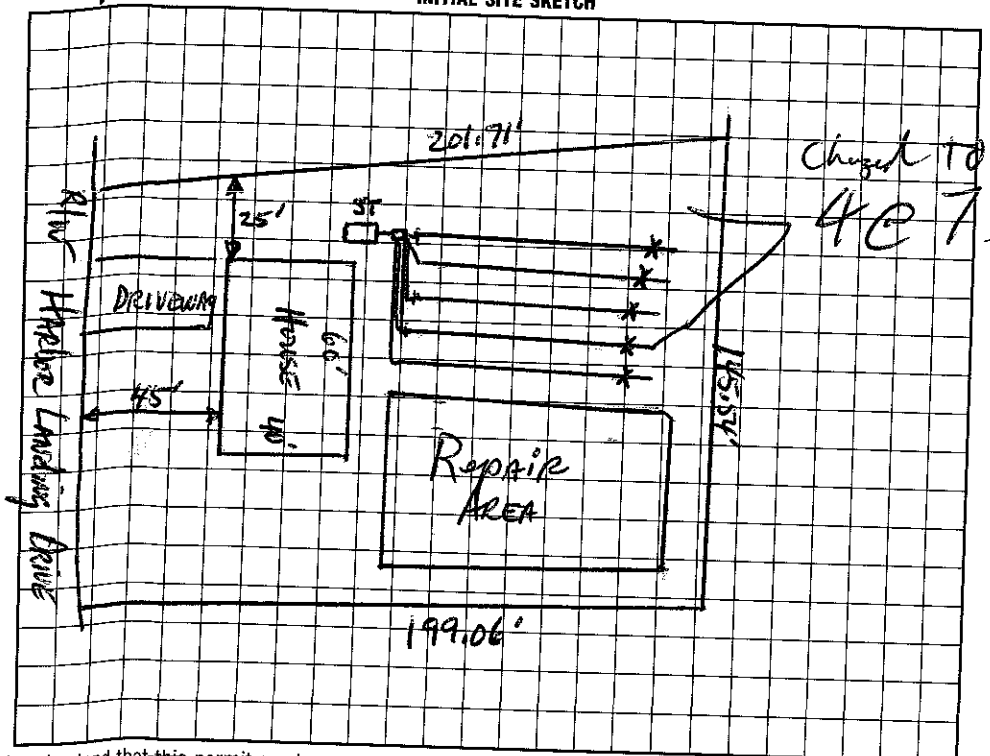
Water Supply: ☐ Individual ☑ ~~Public~~ ☐ ~~Community~~

Comments:/Conditions: Remove old Burms / TERRACES.
* ONE INSPECTION / OBSERVATION PORT PER CATERAL

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: ____ date ____

Improvement Permit by: [signature] RS date 7-31-98

Authorization to Construct by: [signature] RS date 12/8/98

Installed by: LARRY BEAM

Operation Permit by: [signature] date 9/14/99

Existing System Inspection by: ____ date ____

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