4:06

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-634-5281

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

PERMIT# 072795 PIN# 4639734530 4638 88 2657 Lot 86 DATE Nov. 23, '98

OWNER OR CONTRACTOR Stumpy Creek LLC CARROL FISHER CONST. PHONE: Business _____ Home _____

ADDRESS 614 N. Main Salisbury N.C. 28144

LOCATION 150' W TR Perth Rd. TR Harbor Landing Dr. Bear left on Right

SUBDIVISION Harbor Landing BLOCK / SECTION 4 LOT 85, 86, 87 (CORR. DEED) LOT AREA ~71,700 sf SITE CLASS. RS DESIGN FLOW 360 gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 825 Date 11/7/99

Pump Tank: 1000 Gallons; PT 302 Date 8/4/99

Pump Make: ZOELLER Model N98-B Serial No. 7/23/99

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines ~~3 @ 100'~~ 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: pumped-pm-25% Reduction/innovative

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

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

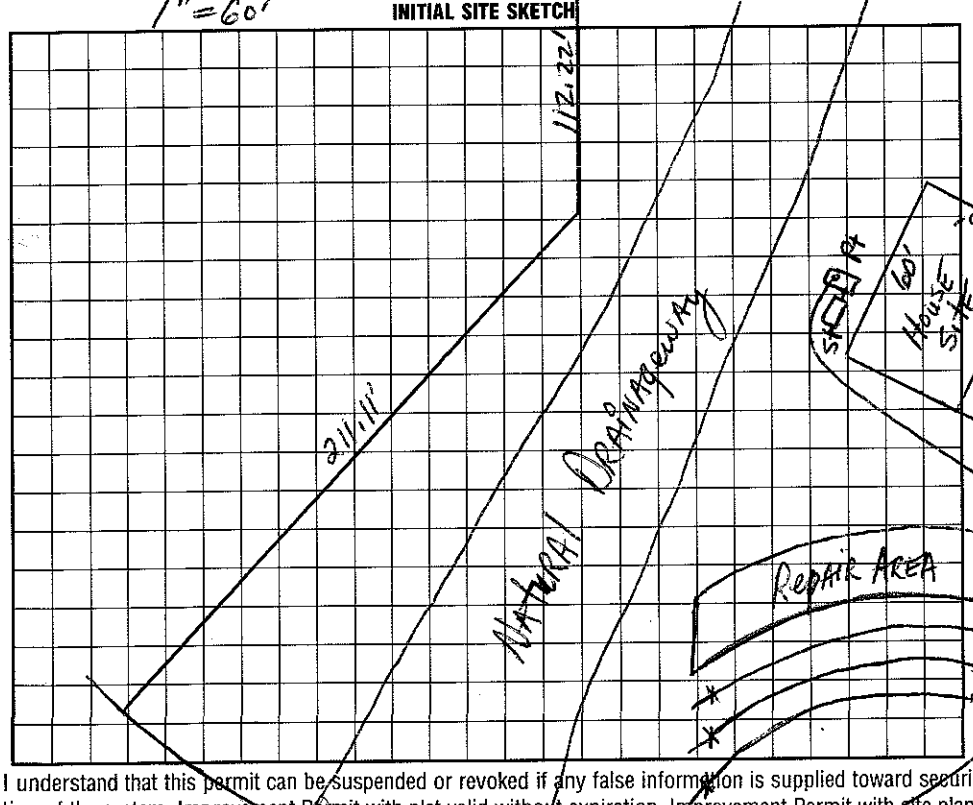
Water Supply: ☐ Individual ☑ Public ☑ Community

Comments:/Conditions:

* ONE INSPECTION PORT PER LATERAL
4@75'x3'

1" = 60'

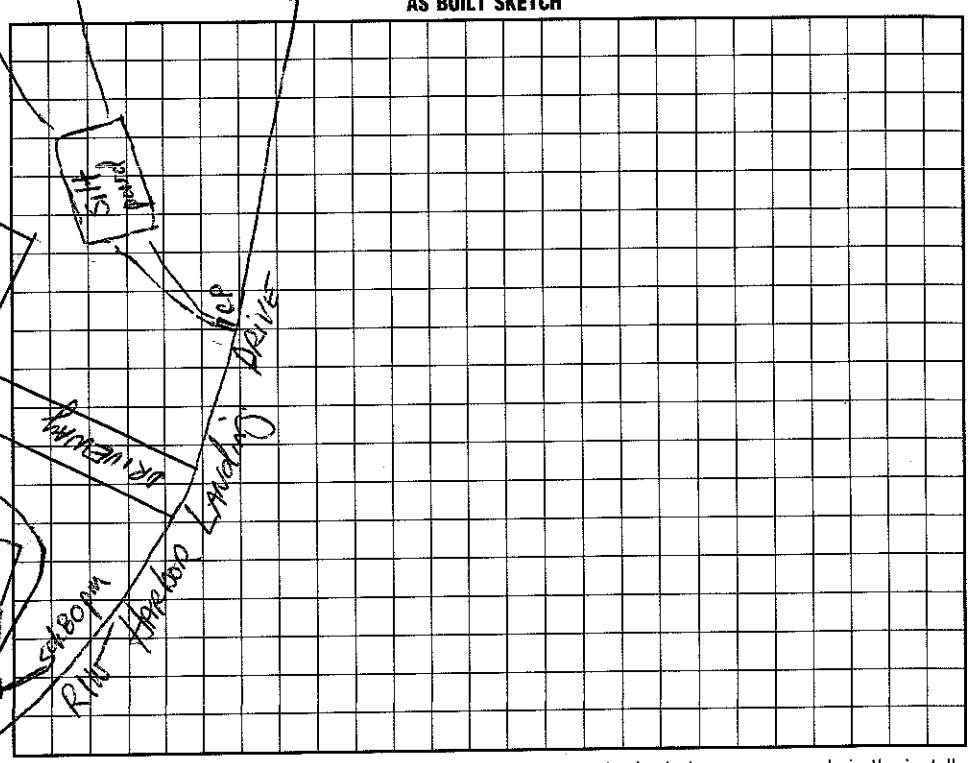
INITIAL SITE SKETCH



Comments:/Conditions:

233.3'

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 11/25/98

Improvement Permit by: Doug Hamm RS date 11-23-98

Authorization to Construct by: Jeff Morgan date 7-1-99

Installed by: Rowan Septic Tank RS. date 11/1/99

Operation Permit by: Maria Hall Olson

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