IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 072188 PIN# ~~4659736124~~ 4638-88-5249 DATE Oct. 26, '98

OWNER OR CONTRACTOR Stumpy Creek LLC PHONE: Business _____ Home _____

ADDRESS 614 N. Main Salisbury

LOCATION Park Rd N. to Harbor Landing Drive Bear left, on Right near end.

SUBDIVISION Harbor Landing BLOCK / SECTION 4 LOT ~~40'~~ of Lot ~~80~~, Lot 81 + 82 combined LOT AREA ~2 ~62,400 ft² SITE CLASS. RS DESIGN FLOW 480 gpd L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 825 Date 3/17/99

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 24"

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

System Description: Gravity 25% Reduction

Repair System Description: SAME Grav./Conv.

Maintenance Agreement Required: ☐ Yes ☑ No S.M.

Gravel Depth NA

☑ House/Mod. Home No. Bedrooms 4/3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

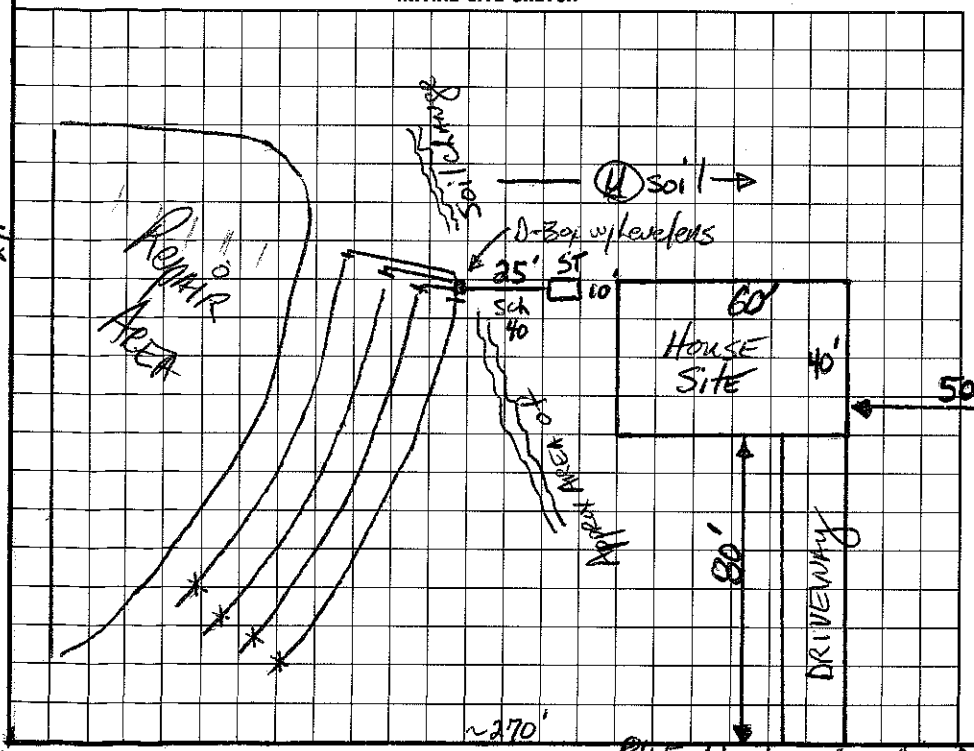
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

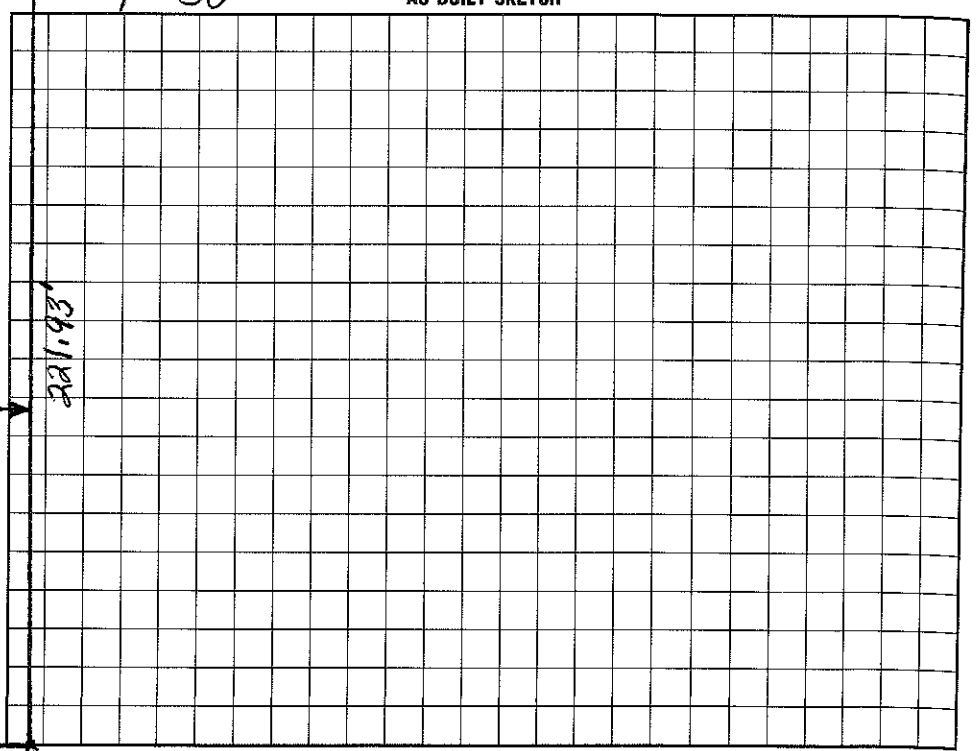
Comments:/Conditions:

Comments:/Conditions: Lot 81, 82 and upper 40' of Lot 80 to be combined into ONE Building Lot. ONE inspection port per LATERAL. Remove any old berms, terraces & install system during dry conditions

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied in applying for 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 10/26/98 Installed by: Rowan Septic

Improvement Permit by: _____ date 10-26-98 Operation Permit by: _____ date 4/26/99

Authorization to Construct by: _____ date 11-12-98 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