IREDELL COUNTY HEALTH DEPARTMENT

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

(4:00) (2:00)

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

PERMIT# 078963 PIN# 4648273561 PT

OWNER OR CONTRACTOR CLYDE GOODMAN DATE 2/24/99

ADDRESS 1035 Mt. Moriah Ch Rd., China Grove, NC 28023 PHONE: Business _____ Home 857-7433

LOCATION 21N, TL Cornelius, TL Homer, 4th from end

SUBDIVISION Cornelius S/D BLOCK / SECTION _____ LOT 21 LOT AREA 1. SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 760 Date 3-5-99

Pump Tank: 1000 Gallons; PT 138 Date 3-7

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 5@60 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: 25% Red x / Pump / PM

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

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

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions:

Keep septic 10' off PL & 5' off House

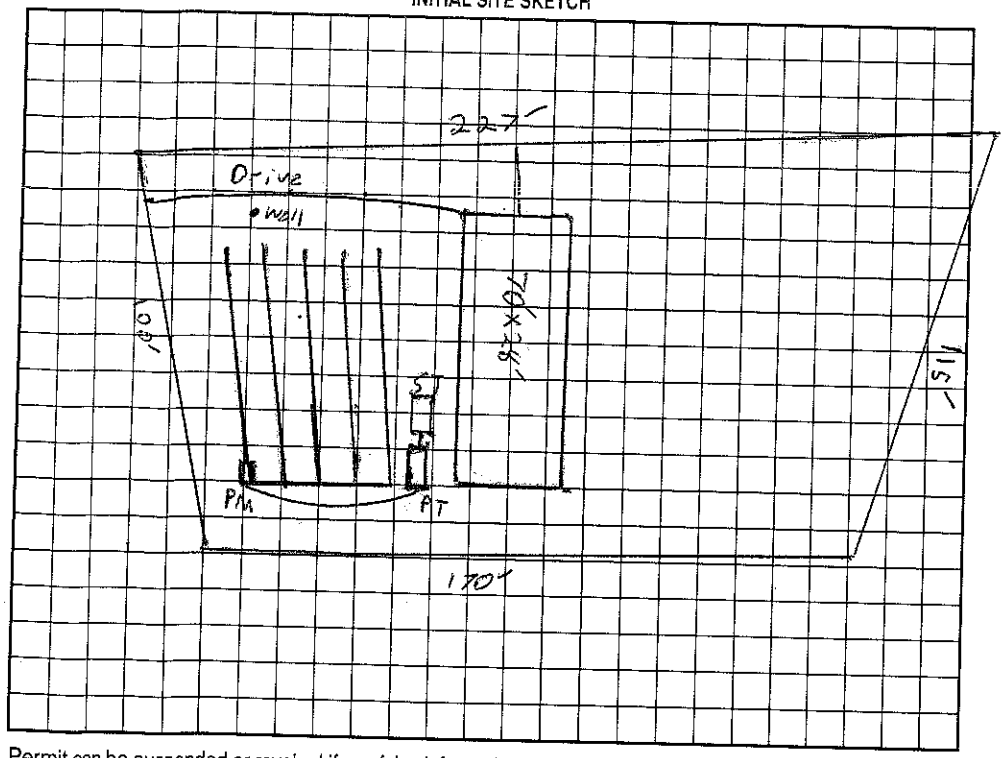
Install lines on Contour

Keep septic Min. of 100' from New well

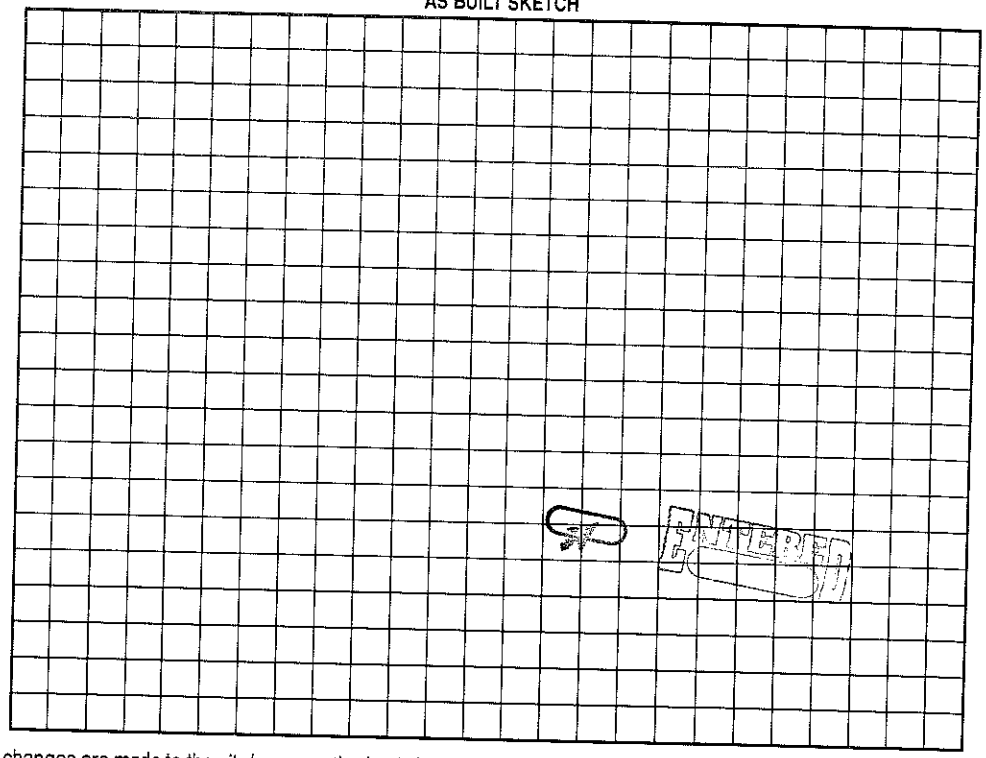
Comments:/Conditions:

System will not be finaled until well is properly abandoned.

INITIAL SITE SKETCH



AS BUILT SKETCH



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: Clyde R. Goodman date 3/2/99

Improvement Permit by: Jeff Morgan date 3/2/99

Authorization to Construct by: Jeff Morgan date 3/2/99

Installed by: Upright Grading

Operation Permit by: Jeff Morgan date 6-24-99

Existing System Inspection by: _____ date _____

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