PIN# 4658-46-3695

IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 21256 DATE Feb 8, '96 TAX MAP NO. part of IRA10 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Bill Ball PHONE: Business ____ Home ____

ADDRESS Rt 2 Box 303A Hiddenite NC 28636

LOCATION US 21 N TL Bailey Rd ~½ mile on Right

SUBDIVISION Farmdale BLOCK / SECTION I LOT 3 LOT AREA > 20,000ft² SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. 3

Septic Tank: 1000 Gallons; STB 825 Date 1-18-96

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

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

No Lines 5@80' Trench Width 36" Max Trench Bottom Depth ~ 24" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: ____ Same

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

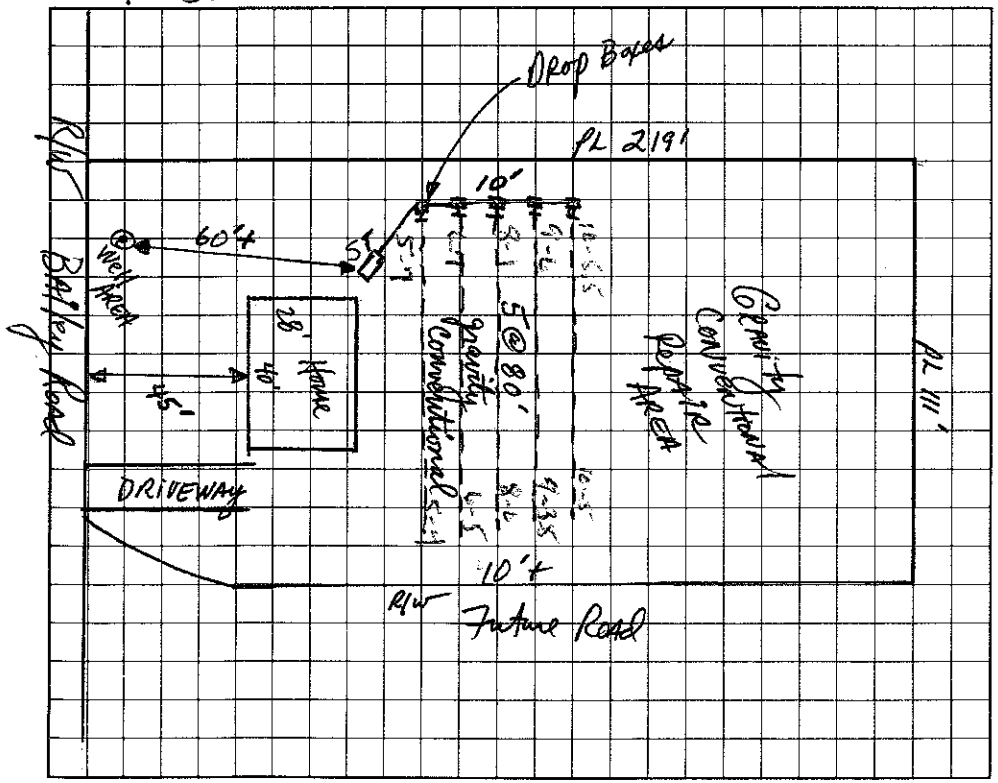
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

Comments:

1"=50'

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.

Signed: Bill Ball

Improvement Permit by: James R. Hamrick, RS date Feb 8, '96

Existing System Inspection by: M. R. Hamrick, RS date 2-8-96

Authorization to construct

Installed by: Wayne Clontz

Certificate of Completion by: ____ date ____

Operation Permit by: Wesley Sparks RS date 3/11/96

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