→ Authorization to Construct 4684284700

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. 23741 DATE 5/24/96 TAX MAP NO. 1A-A-67 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Teresa Gulledge PHONE: Business _____ Home 875-2649

ADDRESS 5620 Prosperity Church Rd, Charlotte NC 28269

LOCATION 136S - TL Patterson Farm Rd → TR Rustic Rd - ≈ 1.3 miles on ~~RT~~ LT. - Prop. ≈.5 mile Rt Rd

SUBDIVISION N/A BLOCK / SECTION N/A LOT N/A LOT AREA 34.41 ac SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .25 gpd/ft²

Septic Tank: 1000 Gallons; STB 249 Date 5/11/96
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: ~~No~~ Fields 1 Square Feet 1440 Linear Feet 480
No Lines (4) 6 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 Some
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☑ No

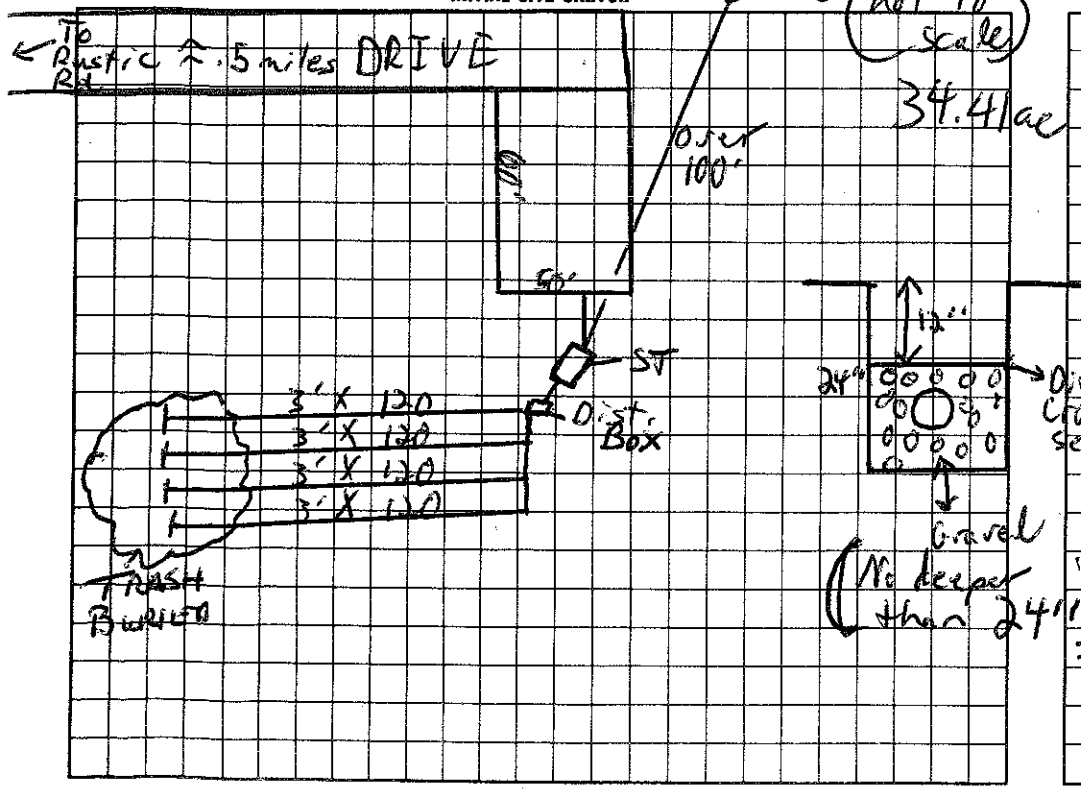
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

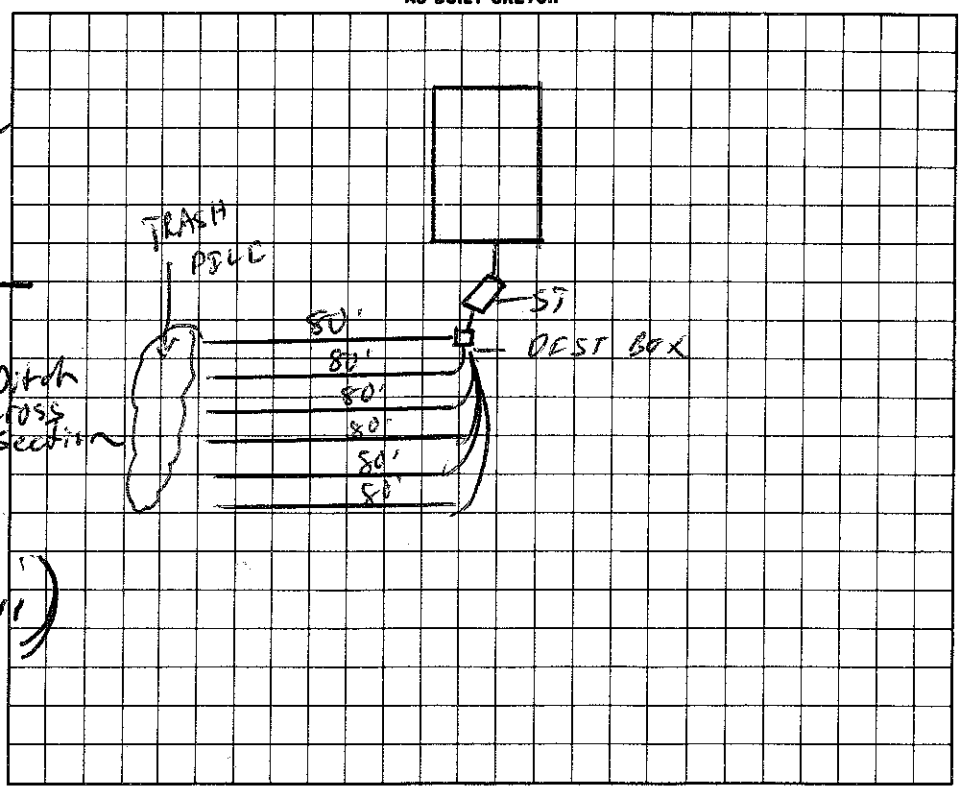
Comments: Keep system shallow ~~if~~ 24" max trench bottom. ~~If~~ Keep well 100' from septic system. Drop boxes may be installed to accomplish for slopes.

Comments: 10/31/96 - Buried trash - Changed to 6 lines at 80' x 3' AWS

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: Teresa H Gulledge

Improvement Permit by: C. Robertson EHS date 5/24/96

Existing System Inspection by: C. Robertson EHS date 5/24/96

Installed by: MORRISON & SON

Certificate of Completion by: _____ date _____

Operation Permit by: C. Robertson EHS date 11/1/96

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

Authorization to Construct is valid for 60 months from issue date