IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 078729 PIN# 4705 34 3245 DATE 1-22-99

OWNER OR CONTRACTOR MARTIN HENDRICKS PHONE: Business ______ Home 872-5295

ADDRESS 346 NEW STERLING RD, STONY POINT, NC 28678

LOCATION I-40 W, TR OLD MTN. ROAD, TR MASSEY / DEAL RD, TL SPEARPOINT DRIVE, AT END ON LEFT

SUBDIVISION FLINT RIDGE BLOCK / SECTION III LOT 14 LOT AREA 0.843 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1 10 99

Pump Tank: ______ Gallons; PT ______ Date ______

Pump Make: ______ Model ______ Serial No. ______

Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" ~~Gravel~~ Depth SAND 6"

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

System Description: 25% REDUCTION GRAVITY

Repair System Description: 25% RED. PUMP/GRAV.

Maintenance Agreement Required: ☐ Yes ☑ No

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

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other ______

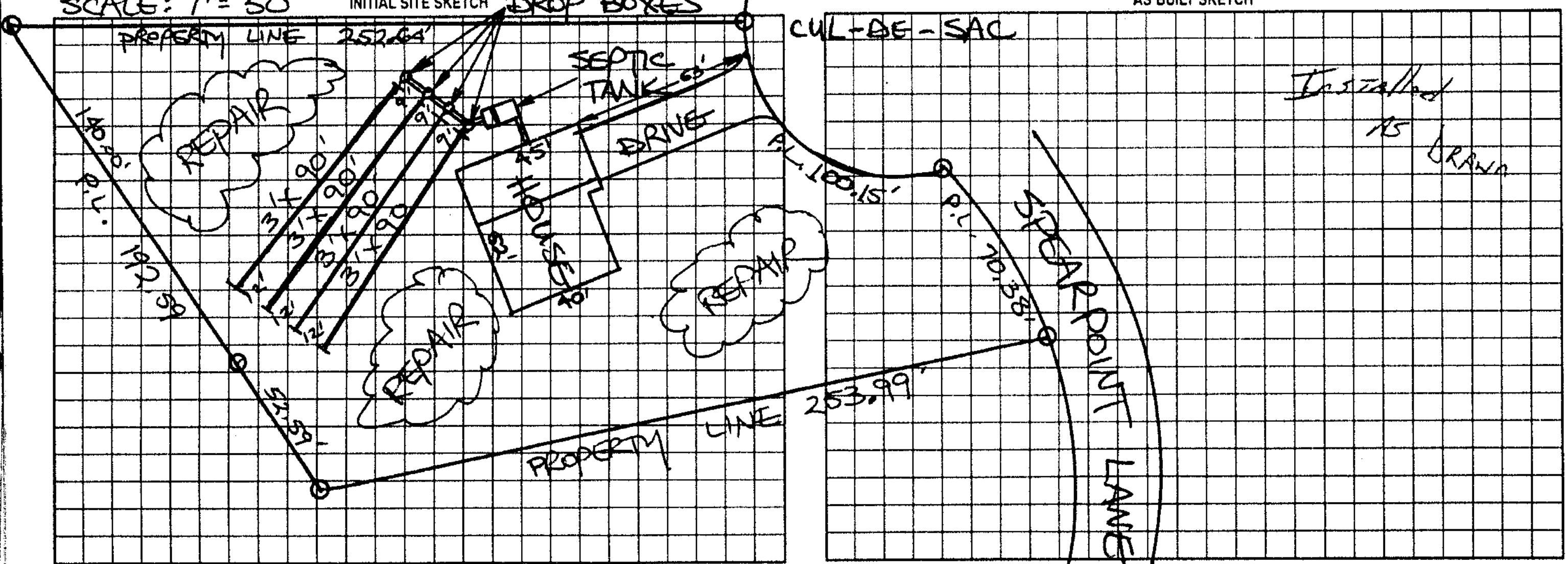
No. Bedrooms 3 No. Bathrooms 2 No. Employees ______

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions: INSTALL 25% REDUCTION SYSTEM USING SIXTY (60) CHAMBERS OR 36 H.D.S SECTIONS ON CONTOUR AS FLAGGED

Comments/Conditions:

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: Marty Hendricks date 1-22-99 Installed by: Esker Elder

Improvement Permit by: STEVE HEDRICK date 1-22-99 Operation Permit by: [signature] date 3-29-99

Authorization to Construct by: STEVE HEDRICK date 1-22-99 Existing System Inspection by: ______ date ______

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