pd#125 10-24-97

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. 067057 DATE 10-18-97 TAX MAP NO. 4705476919 (PT) Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR ERNEST RUNGE PHONE: Business Home 872-6695

ADDRESS 374 LONG ISLAND ROAD, STATESVILLE, NC 28677

LOCATION US 64 W, TL LIPPARD FARM, IR, HAPPY ACRES, TL TRAILWAY, BEAR LEFT, 2ND LOT ON RIGHT

SUBDIVISION CASA GRANDE BLOCK / SECTION II LOT 39 LOT AREA 19990 FT² SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 5-29-98

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ. TO 1200 Linear Feet 200

No Lines FOUR Trench Width 24" Max Trench Bottom Depth 36"

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

System Description: 4" PPBPS GRAVITY

Repair System Description: PPBPS GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

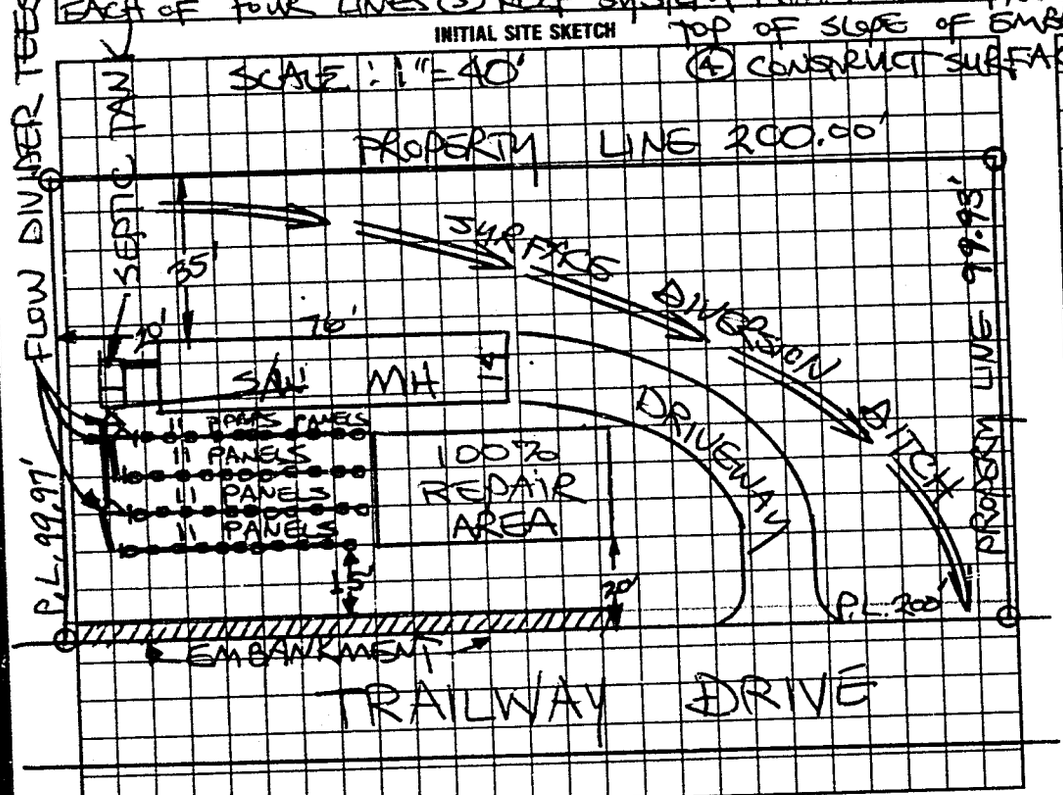
Water Supply: ☐ Individual ☐ Community ☑ Public

~~Gravel~~ Depth SAND 6" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

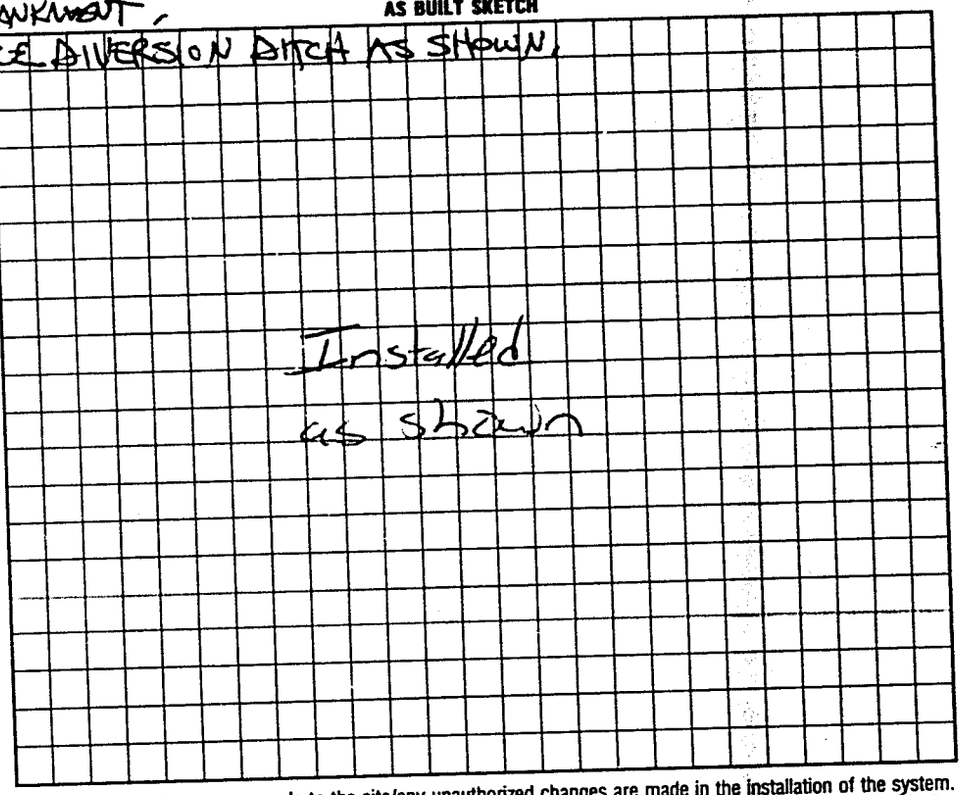
Comments: ① INSTALL 44 PPBPS PANELS IN FOUR EQUAL LENGTH LINES AS SHOWN ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR LINES ③ KEEP SYSTEM MINIMUM 15' FROM TOP OF SLOPE OF EMBANKMENT. ④ CONSTRUCT SURFACE DIVERSION DITCH AS SHOWN.

Comments:

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. Improvement Permit is valid for 60 months from date of issuance. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: _____ Installed by: A-1 Backhoe

Improvement Permit by: STEVE HEDRICK date 10-18-97 ~~Certificate of Completion by:~~ _____ date _____

AUTH. TO CONST. ~~Existing System Inspection by:~~ STEVE HEDRICK date 10-18-97 Operation Permit by: _____ date 8-4-98

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

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