IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

(C1) **IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION**

PERMIT# 112468 PIN# 4709-67-5283 DATE 5-14-03

OWNER OR CONTRACTOR JOSHUA & ALLISON ADAMS PHONE: Business _____ Home 704-634-2028

ADDRESS 173 JOHNSON FARM ROAD, HIDDENITE, NC 28636

LOCATION NC 115 N, TL ASGAH ROAD, TR JOHNSON FARM ROAD, 0.9 MILE ON RIGHT, ~1200' OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 7.68 ACRES SITE CLASS. P3 DESIGN FLOW 360 L.T.A.R. 0.40 GPD/SQ FT

Septic Tank: 1000 Gallons; STB 1007 Date 5-23-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No (PUMP)
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

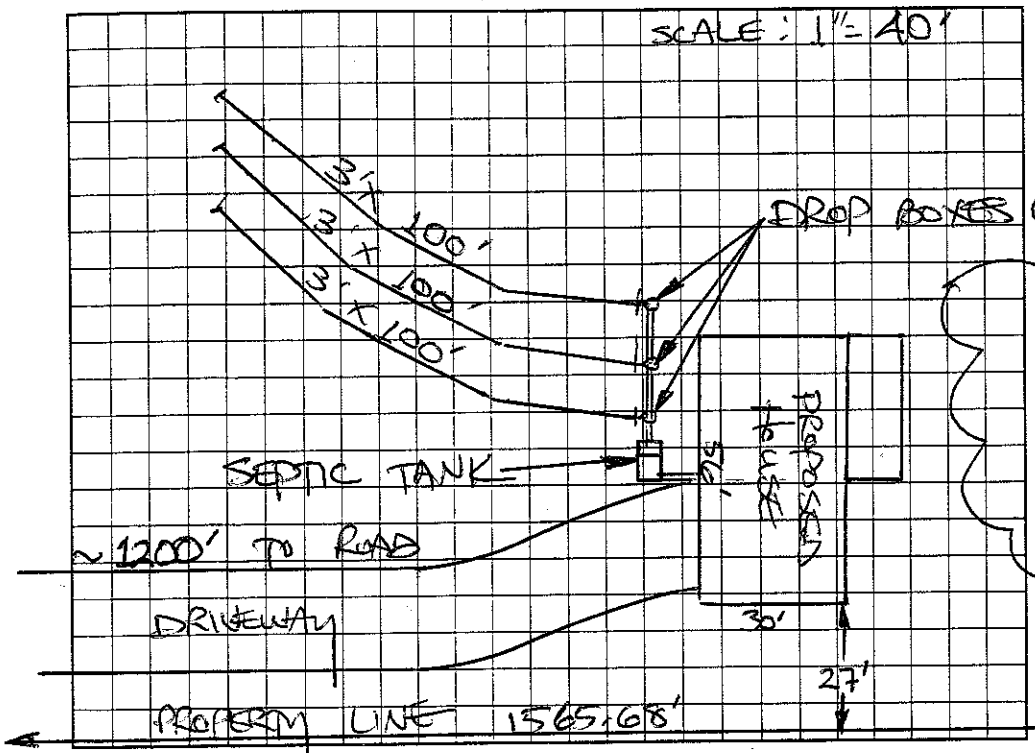
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply:
☑ Individual
☐ Public
☐ Community
WELL

Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments:/Conditions: SYSTEM INSTALLED USING MARKER ON SEPTIC TANK WITH "POLY LOK" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: [signature] date 5/14/03 Installed by: JAMES HUBER

Improvement Permit by: STEVE HEDRICK date 5-14-03 Operation Permit by: STEVE HEDRICK date 7-21-03

Authorization to Construct by: STEVE HEDRICK date 5-14-03 Existing System Inspection by: _____ date _____

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