This permit Voids All Previous Dated Permits

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 74577 PIN# 4639734550 DATE July 16, 99

OWNER OR CONTRACTOR Tom + Terri Jordan PHONE: Business ______ Home 8951460

ADDRESS 20921 E Sterling Bay Lane, Cornelius NC

LOCATION State Park Rd (L) Wildlife Bay (R) Sierra (L) Deer Run (R) Eagle Chase 5th on left

SUBDIVISION Wildlife Bay BLOCK / SECTION 1 LOT 63 LOT AREA 38085 SITE CLASS. PS DESIGN FLOW 600 L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 338 Date 102999
Pump Tank: 1500 Gallons; PT Dellinger Date 7 25 99
Pump Make: Hydromatic Model SHEF50A1 Serial No. 12-99
Nitrification Field: No Fields 1 Square Feet 2000 Linear Feet 500 25% Reduction
No Lines 7 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Pump 25% Reduction
Repair System Description: Pump 50% Reduction
Maintenance Agreement Required: ☐ Yes ☒ No

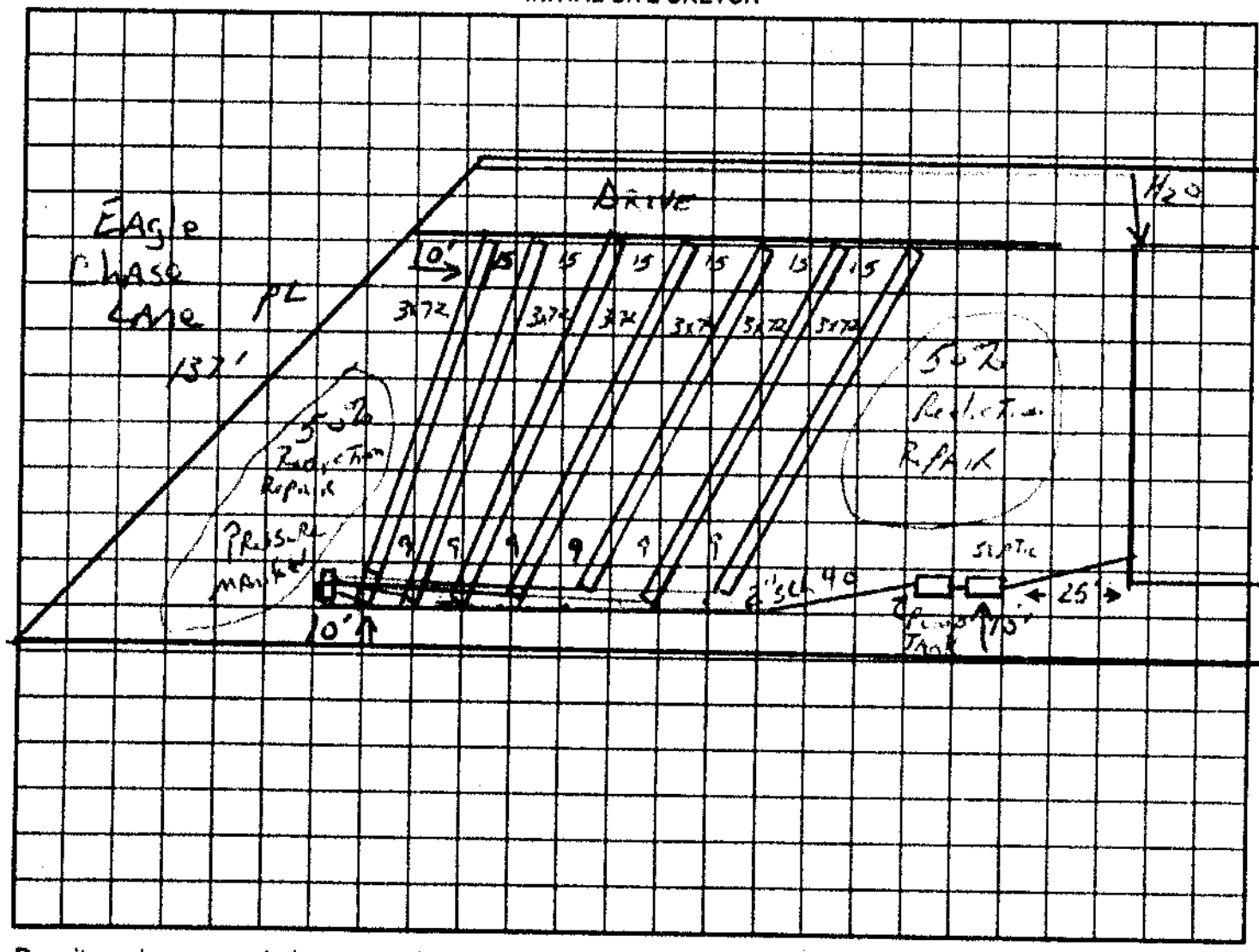
☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other ______
No. Bedrooms 5 No. Bathrooms 5 No. Employees ______
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

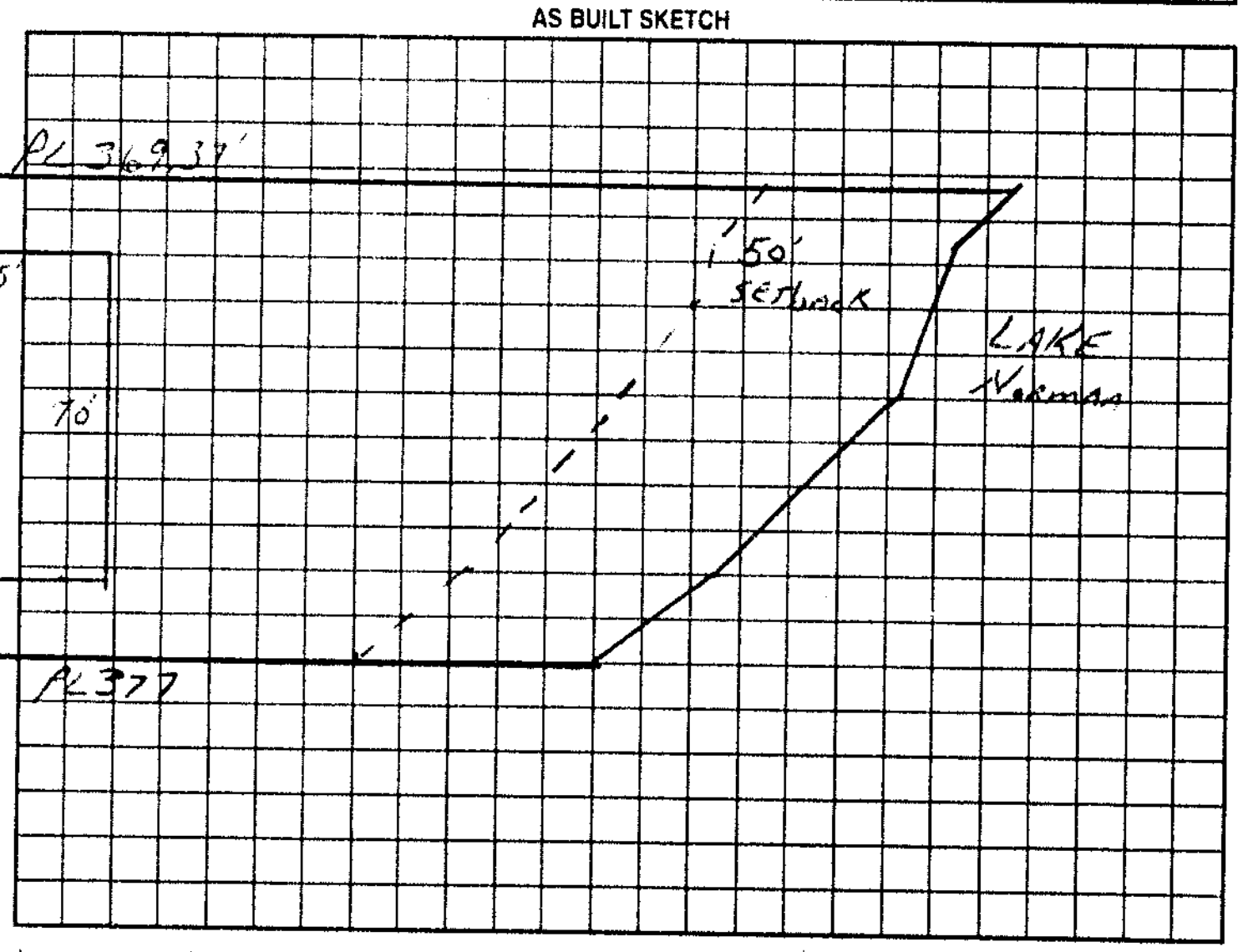
Comments:/Conditions: Install Lines on Contour
84 Chambers = 12 chamber per Line or 50 HDS Sections
See diagrams for Sizing Pump

Comments:/Conditions: Jan 14-2000 Pressure checked OK
Lines installed As shown HDS Sections

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: [signature] date ______ Installed by: Larry Bean
Improvement Permit by: JC Potter date 7.16.99 Operation Permit by: JC Potter date April 10.2000
Authorization to Construct by: JC Potter date 7 16 99 Existing System Inspection by: ______ date ______

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