62492

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. 24329 DATE 8-6-96 TAX MAP NO. 9A-A-34 (PART OF) Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR RANDALL O'BRIEN CONST. PHONE: Business 871-1536 Home

ADDRESS 310 TREEBARK ROAD STATESVILLE NC 28677

LOCATION NC 115 N, TL SCOTTS CREEK ROAD TL HAMPTON GLEN DRIVE, 6TH LOT ON LEFT

SUBDIVISION HAMPTON GLEN BLOCK / SECTION II LOT 6 LOT AREA 15,994.6 ft² SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.275 GPD/ft²

Septic Tank: 1000 Gallons; STB 794 Date 7-17-96
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet REQ'D 1300 Linear Feet 324+
No Lines 6 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: CHAMBERED GRAVITY
Repair System Description: PPBPS PUMP-FED
Maintenance Agreement Required: ☐ Yes ☑ No

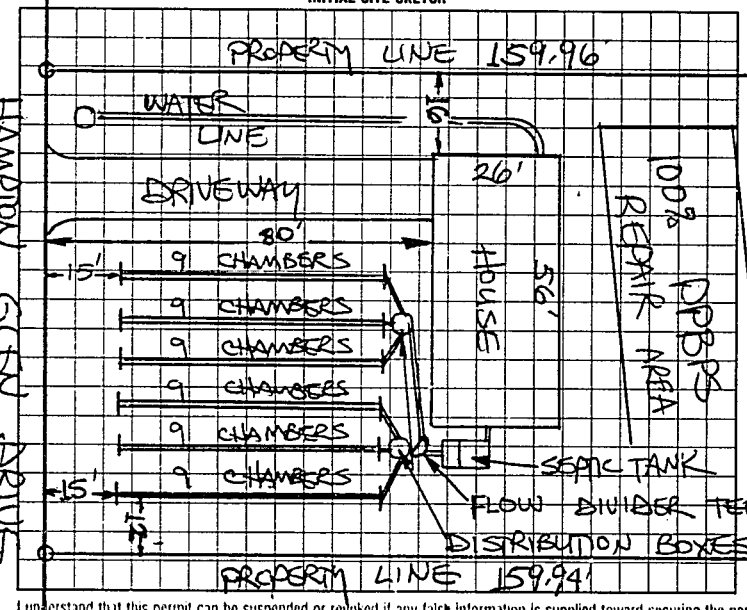
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

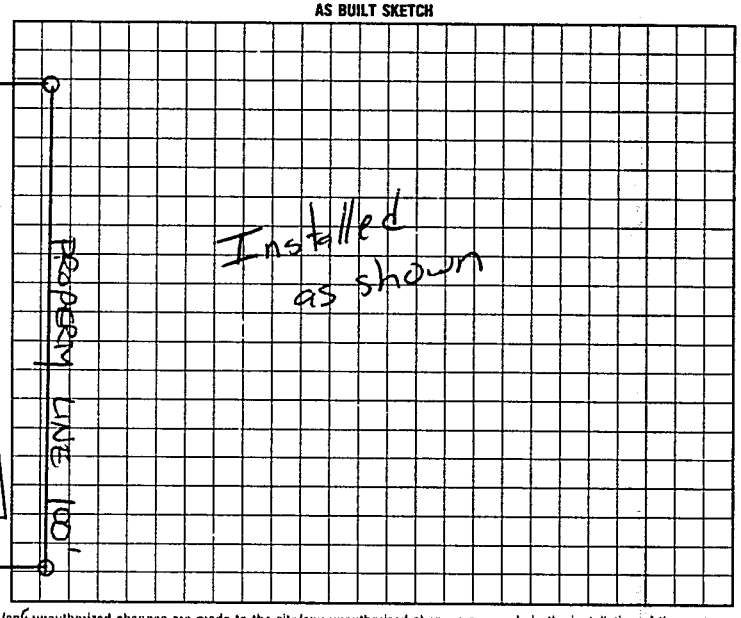
Comments: ① INSTALL 54 CHAMBERS IN SIX EQUAL LENGTH LINES AS SHOWN ② LANDSCAPE YARD TO PROVIDE DRAINAGE AWAY FROM SYSTEM ③ USE ONE FLOW DIVIDER TO SPLIT INTO TWO D. BOXES.

Comments: Need to Landscape yard to provide drainage away from system.

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.

AUTH. TO CONSTRUCT IS VALID FOR FIVE (5) YEARS FROM DATE OF ISSUANCE. IMPROVEMENT PERMIT WITH SITE PLAN IS VALID FOR FIVE YEARS.

Signed:

Improvement Permit by STEVE HESPICK date 8-6-96
AUTH. TO CONST. ~~Certificate of Completion by~~ STEVE HESPICK date 8-6-96

Installed by: date
~~Certificate of Completion by~~ Operation Permit by [illegible] RS date 10-4-96

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

590200