IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 19131 PIN# 4730 65 1977 DATE 1-29-99

OWNER OR CONTRACTOR Frank Hutchens PHONE: Business Home 528 4687

ADDRESS Po Box 624 Troutman N.C.

LOCATION South on Perth Ch Rd on Rt past State Park Rd on Rt

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.62 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.3

Septic Tank: 1000 Gallons; STB 312 Date 8-8-99

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

✓ New System Repair System Type: I II III IV V VI

System Description: Conv. Gravity

Repair System Description:

Maintenance Agreement Required: Yes No

✓ House/Mod. Home No. Bedrooms 3

Mobile Home No. Bathrooms 2½

Business No. Employees

Other

Slab ✓ Crawl Space Basement w/plumbing Basement wo/plumbing

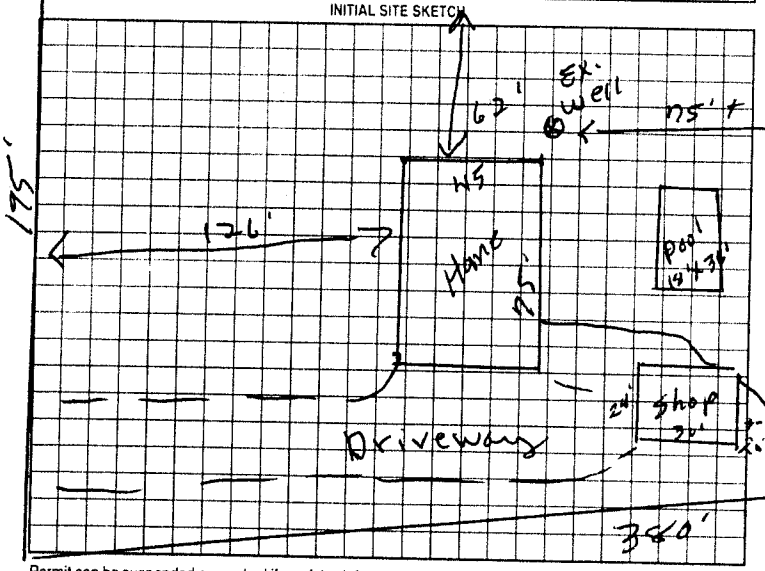
Water Supply: ✓ Individual Public Community

Comments/Conditions:

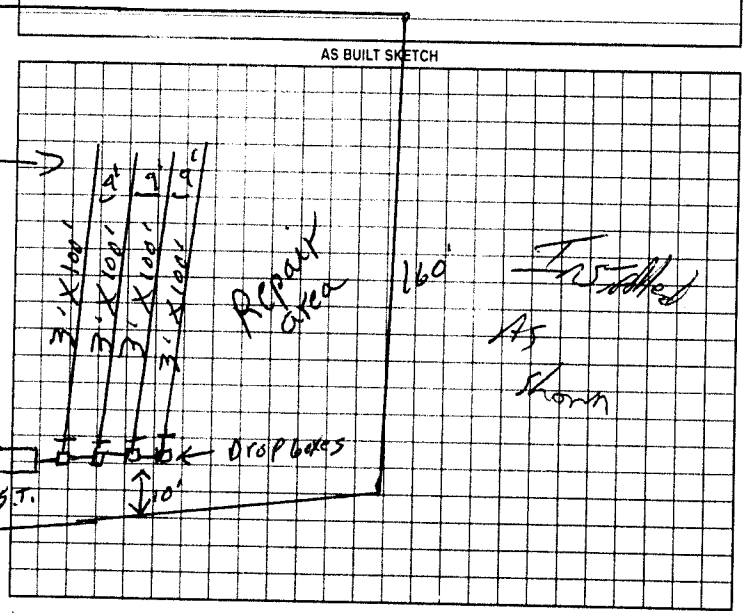
348'

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: X F. S Hutchens date

Improvement Permit by: F. C. Moore date 1-29-99

Authorization to Construct by: F. C. Moore date 1-29-99

Installed by: Robison Sons

Operation Permit by: C Potter date 6/12/99

Existing System Inspection by: date

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