IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# _____ PIN# _____

OWNER OR CONTRACTOR John R. Kintley (Skippers marina snack Bar) PHONE: Business 528 3310 Home _____ DATE 8-5-98

ADDRESS 1156 Perth Rd Trautman 28166

LOCATION Trautman Perth Rd South before Lake Norman on Rt.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA acreage SITE CLASS. _____ DESIGN FLOW 600 L.T.A.R. .25

Septic Tank: 2500 Gallons; STB _____ Date _____

Pump Tank: 2500 Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet _____ Linear Feet _____

No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: Addition

Repair System Description: Pump To Conv.

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms ___

☐ Mobile Home No. Bathrooms ___

☑ Business 15 Seats No. Employees ___

☐ Other ~~Comm~~ Single Serv. Rest

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

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: Adding 1500 gal Grease Trap + Piping To Existing System For Boat Storage

Comments:/Conditions:

INITIAL SITE SKETCH

See Plans By B.K. Barringer P.E. Revised July 20, 1998

AS BUILT SKETCH

Same as Engineered plans

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 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 _____ date _____

Improvement Permit by: P.C. Moore date 8-5-98

Authorization to Construct by: P.C. Moore date 8-5-98

Installed by: Eckhart Const. Inc.

Operation Permit by: P.C. Moore date 10-2-98

Existing System Inspection by: _____ date _____

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