...DELL COUNTY HEALTH DEPARTMENT Const. Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 22524 DATE Nov. 4, '97 TAX MAP NO. part of 3FA24 4740 11 0121 Watershed: ☑ Yes ☐ No WSIII CA

OWNER OR CONTRACTOR AH INC. PHONE: Business _____ Home _____

ADDRESS 2310 S. MAIN ST. Salisbury N.C. 28147

LOCATION Peeler Rd. N. TR Clontz Hill Rd. TR @ bottom of hill onto Ridge Creek Dr. TR Brook Creek 3rd on left

SUBDIVISION Rocky Creek Cove BLOCK / SECTION _____ LOT 89 LOT AREA 20,000 ft²+ SITE CLASS. RS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 325 Date 10/17/97

Pump Tank: 1000 Gallons; PT 47 Date 12/6/97

Pump Make: ZOELLER Model N137 Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 390

No Lines 4@75' Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: pumped pm - chambered/HAS/simulated

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth NA

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

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

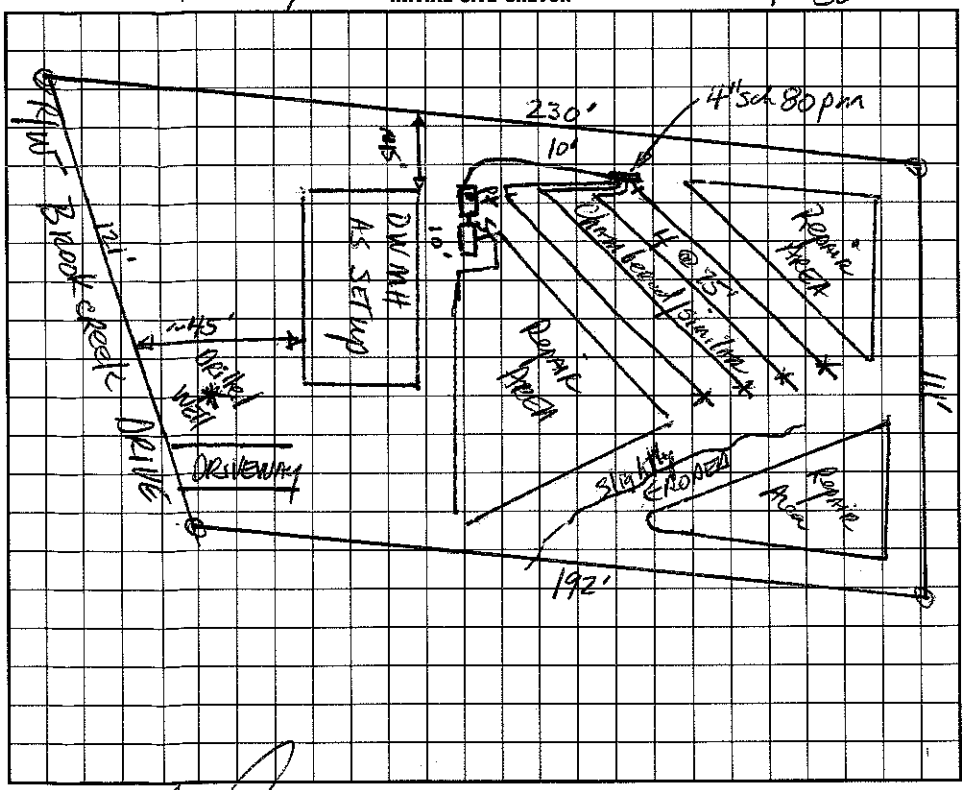
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: Home pad cut & DWMH set up prior to visit for issuance of I.P.

*ONE inspection/observation port per Lateral

Comments: @ 25 / 12 / 1250 / 625 / 75.00

INITIAL SITE SKETCH 1"=50'



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. Improvement Permit is valid for 60 months from date of issuance.

Signed: _____

Improvement Permit by: _____ date 11-4-97

~~Construction~~ ~~Existing System Inspection~~ by: _____ date 11-4-97

Installed by: Rowan Septic Tank

Certificate of Completion by: Wesley Sparks R.S. date 2/19/98

Operation Permit by: Wesley Sparks R.S. date 2/19/98

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