Formerly lot #29 & #2-230

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 086474 PIN# ~~4740328058 PT~~ 4740-42-7832 DATE 11/22/99

OWNER OR CONTRACTOR Spears Construction PHONE: Business 361-7518 Home

ADDRESS 607 Anderson Salisbury NC 28144

LOCATION Perth Rd TR Glontz Hill TR into Forest Glen at intersection on right

SUBDIVISION Forest Glen BLOCK / SECTION LOT 2 LOT AREA .59 Acre SITE CLASS. PS DESIGN FLOW 300gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB Date 2/10/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4 at 100' Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity - Conventional
Repair System Description: Restorative
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

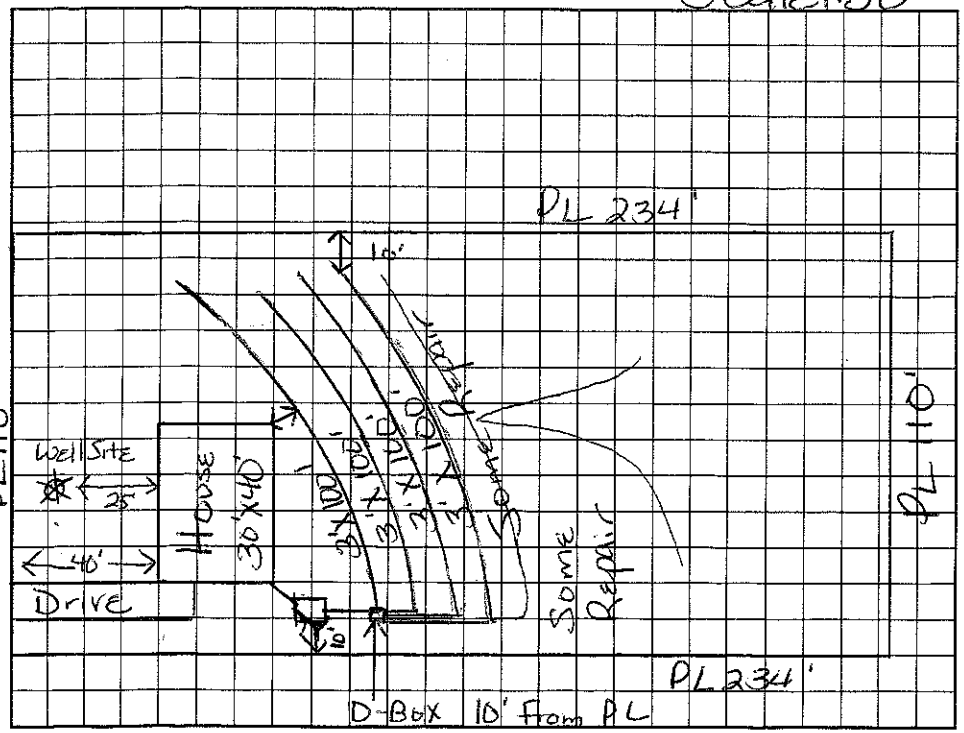
Gravel Depth 12" ☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments/Conditions: Keep Septic System 10' from PL, 5' from House & 50' from Well.

Comments/Conditions:

INITIAL SITE SKETCH Scale 1:50



Stratley Pines Dr. PL 110'

AS BUILT SKETCH

Installed as Drawn in 5-80' lines

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: date 12-6-99 Installed by: Bowers

Improvement Permit by: Maria H. Dolan R.S. date 11/22/99 Operation Permit by: Maria H. Dolan R.S. date 3/27/00

Authorization to Construct by: Maria Dolan R.S. date 11/23/99 Existing System Inspection by: date

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