pd#125 11-4-97 6.7"

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. 069936 DATE 10-23-97 TAX MAP NO. 4742 44 4030 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR SHELLEY P. FERDON PHONE: Business 873-7776 Home 924-9444

ADDRESS 467 MURDOCK ROAD, TROUTMAN, NC 28166

LOCATION US 21 S, TL MURDOCK ROAD, TL DUCK CREEK ROAD, 2ND LOT ON RIGHT

SUBDIVISION ____ BLOCK / SECTION ____ LOT 1 LOT AREA LIMITED SITE CLASS PS DESIGN FLOW 720 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1500 Gallons; STB 011 Date 6-23-98

Pump Tank: 1500 Gallons; PT 99 Date 1-23-98

Pump Make: Hydromatic Model SH60 Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ.FT 2400 Linear Feet 600+

No Lines TEN Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 6" SAND

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

System Description: CHAMBERED PUMP FED

Repair System Description: PRBPS PUMP-FED

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other TWO-UNIT DUPLEX

No. Bedrooms 6 No. Bathrooms 4 No. Employees ____

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

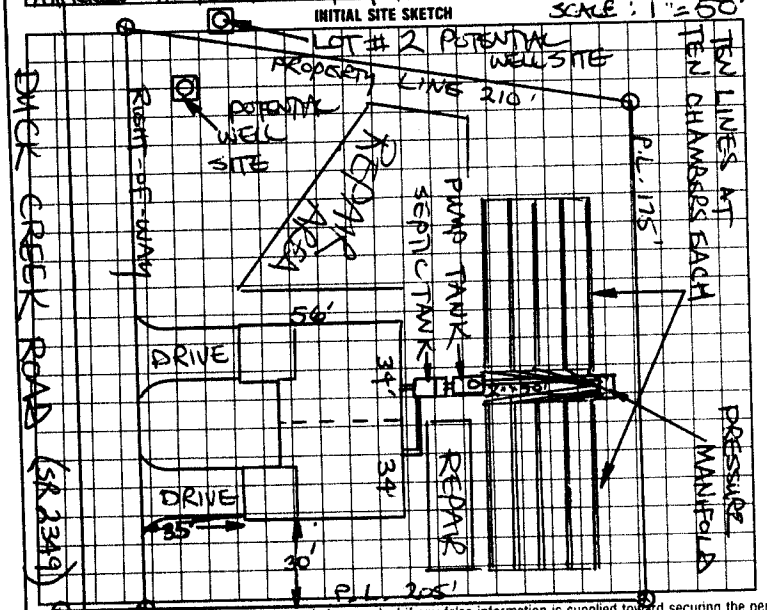
Water Supply: ☒ Individual ☐ Community ☐ Public WELL

Comments ① KEEP SYSTEM MINIMUM 100' FROM WELL ② INSTALL 100 CHAMBERS IN TEN EQUAL LENGTH LINES ON CONTOUR ③ SCOUR TRENCH SIDEWALLS WHERE SMEARING OCCURS ④ SEE ATTACHED SHEETS FOR PUMP & PRESSURE MANIFOLD REQUIREMENTS

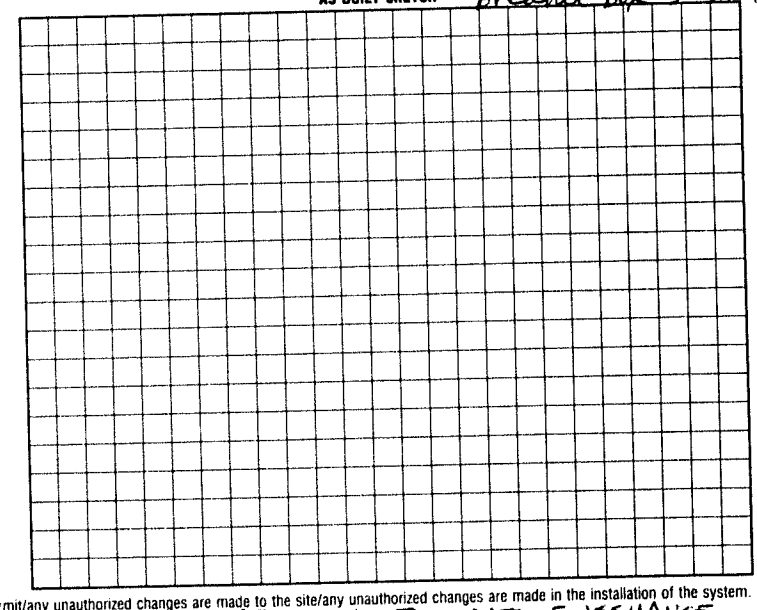
Comments: Inspected Drain lines + manifold Box 9-30-98 JCM

Inspected Alarm + Box + Breaker Box 3-30-99

INITIAL SITE SKETCH SCALE: 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. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: ____ Installed by: A-1 Backhoe

Improvement Permit by: STEVE HEDRICK date 10-23-97 Certificate of Completion by: ____ date ____

~~Existing System Inspection~~ by: STEVE HEDRICK date 10-23-97 Operation Permit by: R. C. Moore date 3-30-99

AUTH. TO CONST.

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