IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 78753 PIN# 4752607250 DATE 1-14-99

OWNER OR CONTRACTOR Richard Anthony PHONE: Business Home 8727359

ADDRESS 2302 Salisbury Hwy Sta, N.C.

LOCATION I-77 S TL Amity Hill Rd past Shiloh ch Rd 1/8 mi left.

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.22acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .33

Septic Tank: 1000 Gallons; STB 1012 Date 2-17-03
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines 3 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 2
☐ Business No. Employees
☐ Other

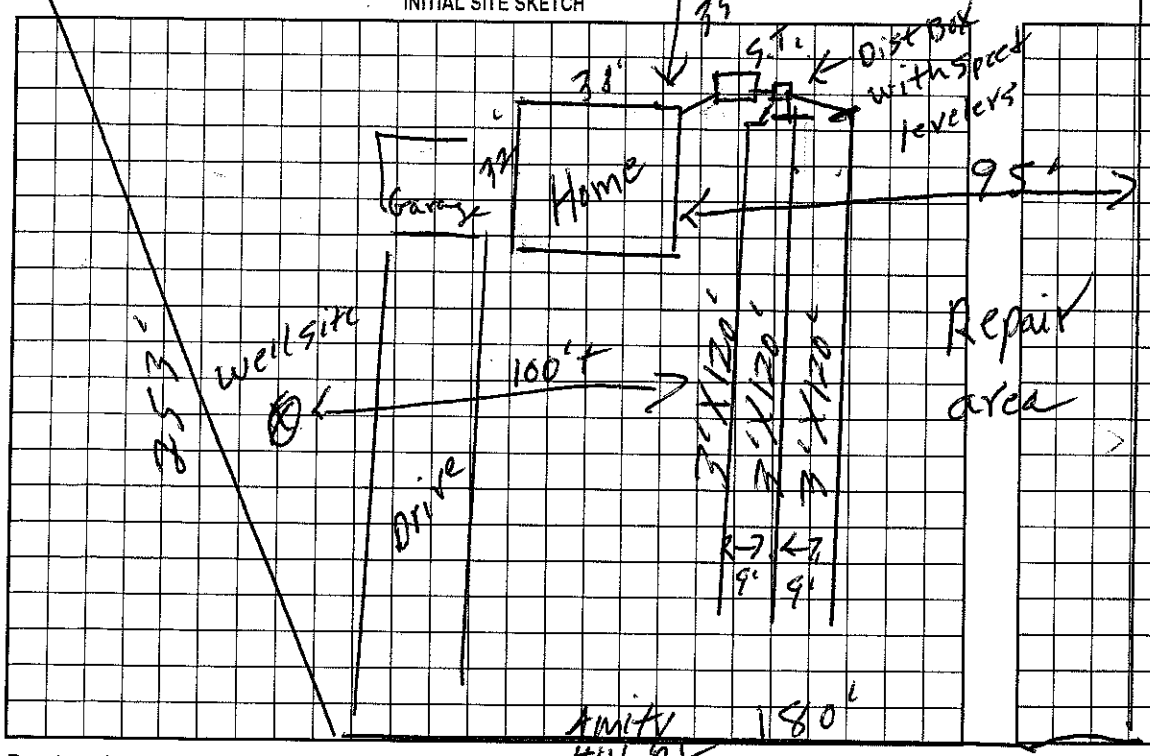
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

Comments:/Conditions: 3Hm1

Comments:/Conditions: ① SEPTIC TANK WITH MARKER INSTALLED USING "TUFFITE" FILTER ② ANGULAR BLOCKY SOIL STRUCTURE OBSERVED DURING FINAL INSPECTION

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: Y. Cynthia Plyler / Agent date 1-14-99 Installed by: DAVID YOUNTZ

Improvement Permit by: R.C. Moore date 1-14-99 Operation Permit by: STEVE HEDRICK date 9-12-03

Authorization to Construct by: R.C. Moore date 1-14-99 Existing System Inspection by: date

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