IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# ~~75114~~ 75153 PIN# 4757352459 DATE 9-27-99

OWNER OR CONTRACTOR Tim Hamby PHONE: Business 872-0825 Home

ADDRESS 906 old mocksville Rd Statesville N.C.

LOCATION Hwy 21 N TL Bethany Ch Rd TR Gilead Ln 2nd Rt.

SUBDIVISION Bethany Trace BLOCK / SECTION LOT 25 LOT AREA .45 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .13

Septic Tank: 1000 Gallons; STB 312 Date 2-27-00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

✓ New System ☐ Repair System Type: I II III IV V VI
System Description: Gravity 25% Reduction
Repair System Description:
Maintenance Agreement Required ☐ Yes ☐ No
✓ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

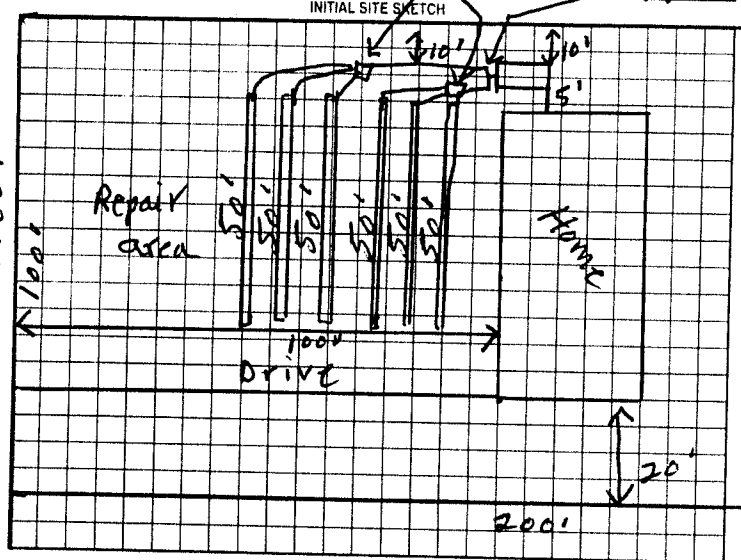
~~☐~~ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

Water Supply:
☐ Individual
✓ Public
☐ Community

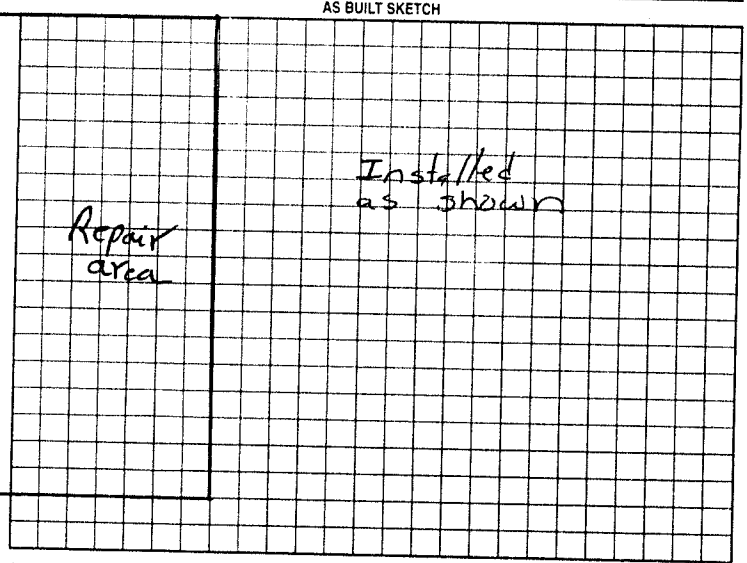
Comments/Conditions

Comments Conditions
Replaces Permit issued 8-29-98

INITIAL SITE SKETCH



AS BUILT 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: Hayden Hamby Jr date 10-1-99 Installed by: Craig Thompson

Improvement Permit by: R.C. Moore date 9-27-99 Operation Permit by: [illegible] date 5-9-00

Authorization to Construct by: R.C. Moore date 9-27-99 Existing System Inspection by: [illegible] date

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