IREDELL COUNTY HEALTH DEPARTMENT

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

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

1e.00

PERMIT# 086225 PIN# 4760181861 PT / 4760181919 DATE 1-3-2000

OWNER OR CONTRACTOR Gloria Harris PHONE: Business 663-4814 Home 528-4974

ADDRESS 170 Hanford Rd. Troutman, NC 28166

LOCATION US21/Hwy 115 TR Shinnville Rd TR Weathercreek TR Hanford Rd at end of Hanford beside brick house

SUBDIVISION ____ BLOCK / SECTION ____ LOT ____ LOT AREA .58 Acre SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB ____ 1613 Date 5/8/00

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" Gravel Depth 12"

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

System Description: Gravity – Conventional

Repair System Description: Modified/Innovative

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

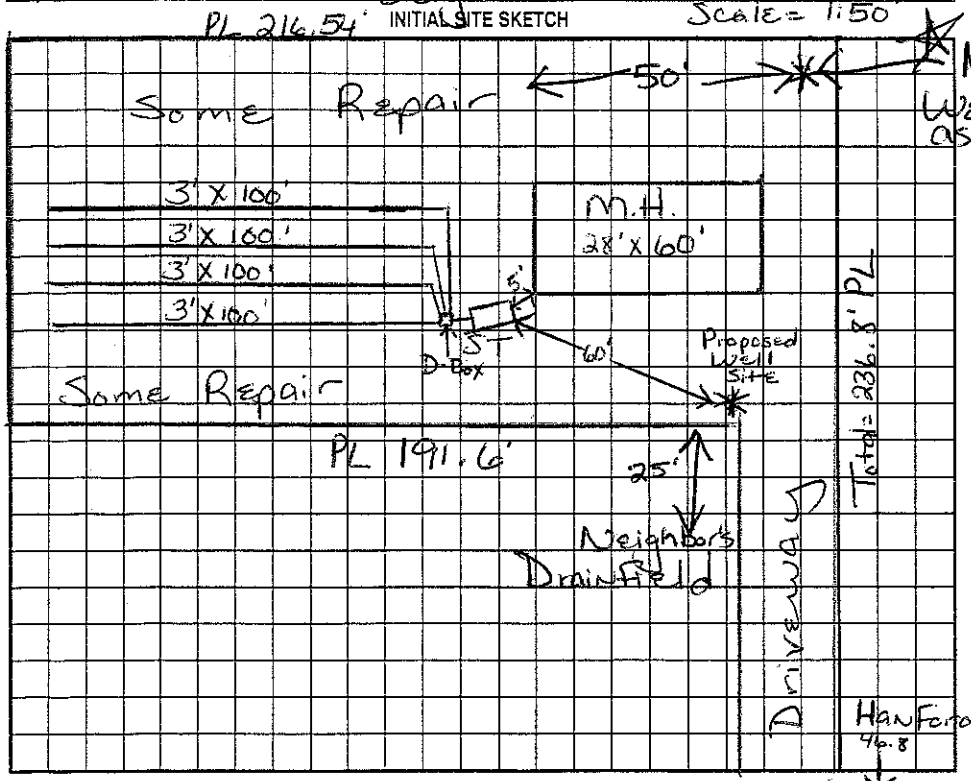
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Keep Septic System at least 10' from PL, 5' from House & 50'+ from well. Okay to cut down/feather off old Farm berms only.

Comments:/Conditions: Note to Installer: Install drainlines on contour after old farm berms are removed, reshoot contours.

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: Gloria D Harris date 1/3/2000 Installed by: A-1 Backhoe

Improvement Permit by: Maria H. Dotson RS date 1/3/2000 Operation Permit by: Wesley Sparks RS. date 8/7/00

Authorization to Construct by: Maria H. Dotson RS date 1/3/2000 Existing System Inspection by: ____ date ____

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