IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 13437 PIN# 4741 87 4750 97452 DATE 11-3-06

OWNER OR APPLICANT John Michael Brown PHONE: Business _____ Home 704-528-1047

ADDRESS Box 143, Barium Springs NC

LOCATION Amity Hill Rd to Bowdle Amity to Hemlock to Beaver 1st Right Road house a left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 28.75 SITE CLASS. _____ DESIGN FLOW 300 L.T.A.R. .25

Septic Tank: 1050 Gallons; STB 794-1000 Date 12-30-05

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields _____ Square Feet 1440 Linear Feet 360

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

☑ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: 25% Reduction

Repair System Description: 25% Red

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Persons _____ No. Employees _____

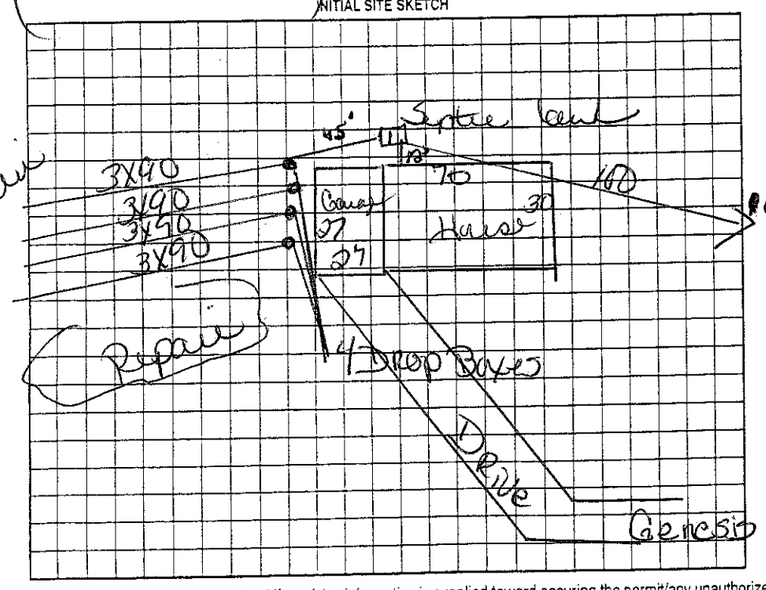
Water Supply: ☑ Individual ☐ Public ☐ Community

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

Comments:/Conditions: Maintain all setback Install on Contour

Not to scale

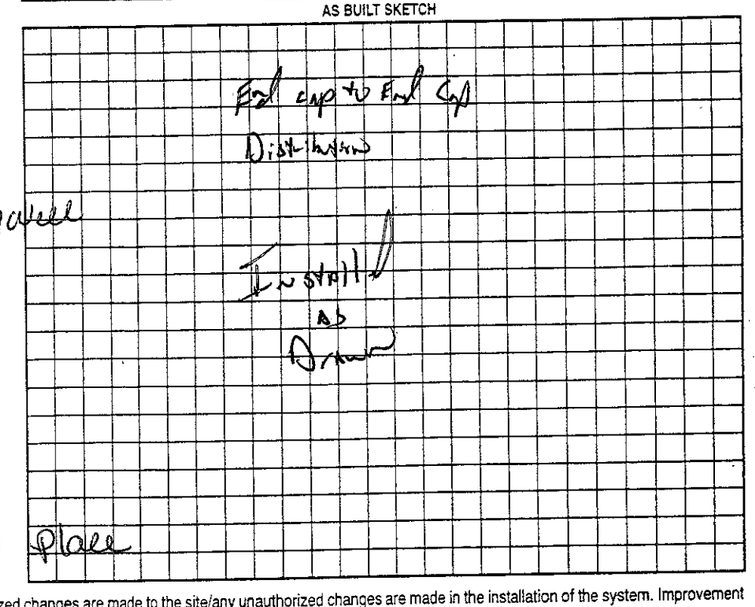
INITIAL SITE SKETCH



Comments:/Conditions: Maintain well setbacks

Filter installed

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 Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Permit with plat valid without expiration ☐ Improvement Permit with site plan valid for sixty months ☐

Signed: John Michael Brown date _____

Improvement Permit by: Kelly Cook date 11-3-06

Authorization to Construct by: Kelly Cook date 11-3-06

Installed by: Marty Tucker

Operation Permit by: Jim Higgs, RS date 21 Feb. 08

Existing System Inspection by: _____ date _____

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