IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 92246 PIN# 4765 57 8821 PT DATE 10/5/00

OWNER OR CONTRACTOR DONNIE BOLOOK PHONE: Business 531-5042 Home

ADDRESS PO BOX 136 HARMONY NC 28634

LOCATION 64E - TL RIVERHILL RD - 1 MILE ON RT - EAST CT MH PARK ON LT - # 187 (BILLS RD)

SUBDIVISION EAST CT MAP BLOCK / SECTION LOT LOT AREA - SITE CLASS PS DESIGN FLOW 360 L.T.A.R.

Septic Tank: 1000+ Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model: EXISTING Serial No.

Nitrification Field: No Fields Square Feet Linear Feet

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

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

System Description: GRAVITY CONVENTIONAL

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 3

☐ Business No. Employees

☐ Other

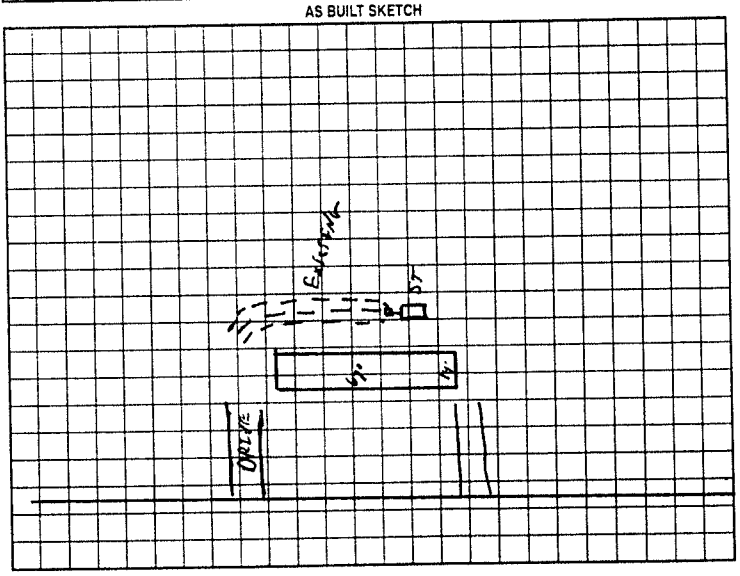
Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions:

Comments /Conditions: 1) MOBILE HOME MUST BE SET 5' FROM ANY PART ON SYSTEM.

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: date

Improvement Permit by: date

Authorization to Construct by: date

Installed by:

Operation Permit by: date

Existing System Inspection by: C. [signature] RS date 10/5/00

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