IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 79358 PIN# 4766 75 8171 DATE 2-18-99

OWNER OR CONTRACTOR Bobby Anderson PHONE: Business 704 546 2273 Home

ADDRESS 239 Pinkey Rd Harmony N.C.

LOCATION Old mocksville TR Chestnut Grove TR 7 Sp. 4th lot left

SUBDIVISION Seven Springs BLOCK / SECTION LOT 6 LOT AREA 1.75 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 5-24-99
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36 Gravel Depth 12"

☑ New System ☐ Repair System Type: I, ☑ III, IV, V, VI
System Description: Conv. Gravity
Repair System Description: " "
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

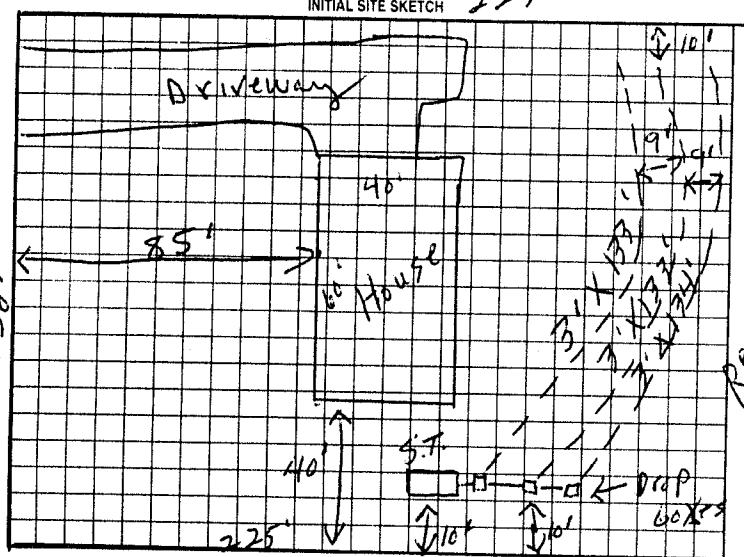
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

Water Supply: ☐ Individual ☑ Public ☐ Community

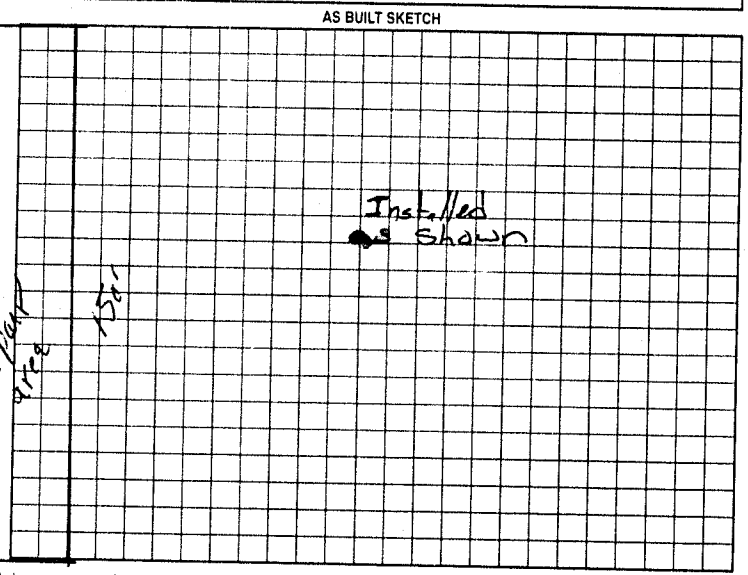
Comments/Conditions:

Comments/Conditions:

INITIAL SITE SKETCH 225'



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: X Bobby Anderson date Installed by: Tommy Frye

Improvement Permit by: R. C. Moore date 2-18-99 Operation Permit by: Mary C Off RS date 7-29-99

Authorization to Construct by: R. C. Moore date 2-18-99 Existing System Inspection by: date

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