IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 077994 PIN# 4778 07 5063 (PART) DATE 2-3-00

OWNER OR CONTRACTOR RICKEY STEELE PHONE: Business Home (304) 938-3965

ADDRESS P.O. BOX 805 JARVIS, W.V. 24844

LOCATION US 21 NORTH, TR CHIEF THOMAS ROAD, TR HARMONY BLEND, LOT AT END OF CUL-DE-SAC

SUBDIVISION EASTERN ACRES BLOCK / SECTION ____ LOT 19 LOT AREA 6.68 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.40 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 3-22-00
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III. IV. V. VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONV. PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

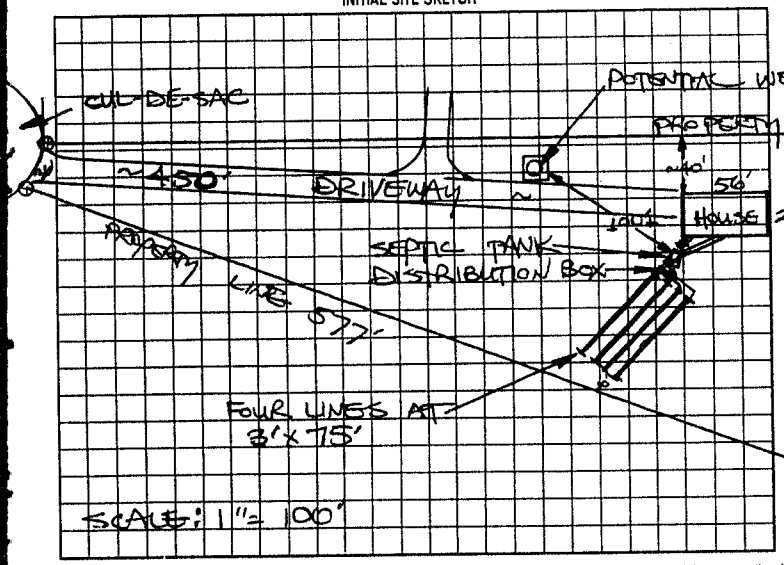
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 1
☐ Business No. Employees ____
☐ Other ____

Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

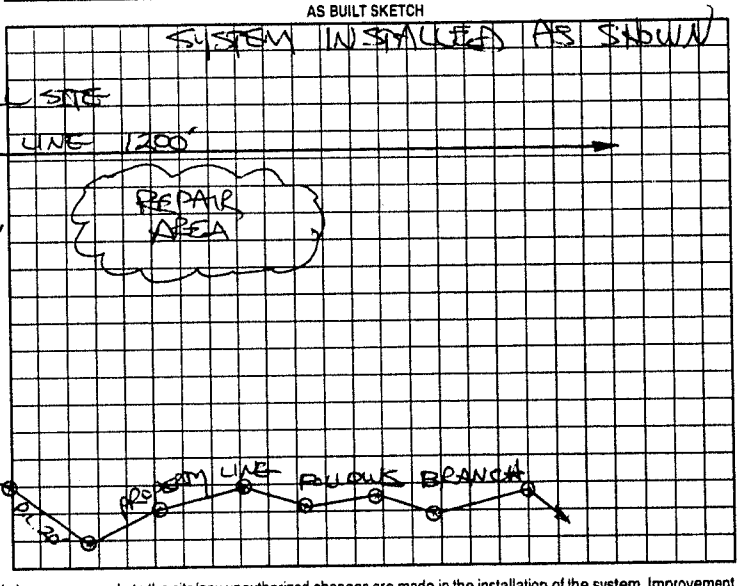
Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL

Comments/Conditions: SEPTIC TANK WITH RISERS AND MARKER INSTALLED USING "POLYLOK" FILTER

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: X Rickey Steele date 2-3-00 Installed by: TUCKERS HAULING & GRADING

Improvement Permit by: STEVE HEDRICK date 2-3-00 Operation Permit by: STEVE HEDRICK date 5-10-02

Authorization to Construct by: STEVE HEDRICK date 2-3-00 Existing System Inspection by: ____ date ____

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