IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 106130 PIN# 4779-68-5129.C DATE 5-22-02

OWNER OR CONTRACTOR FILBERT W. FISHER PHONE: Business _____ Home 704-546-7478

ADDRESS 141 ESTHER DRIVE, ~~[redacted]~~ HARMONY NC 28634

LOCATION US 21 NORTH, TR MT. BETHEL RD, TL ~~[redacted]~~, FISHER DR TR ESTHER LANE ~900' ON LEFT

SUBDIVISION MHP JONES BLOCK / SECTION _____ LOT 68 LOT AREA 51 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons: STB 760 Date 1-19-02
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No _____
Nitrification Field: No Fields 1 Square Feet EQ. TO 1440 Linear Feet 360
No Lines SIX Trench Width 36" Max Trench Bottom Depth 26" Gravel Depth N/A

☑ New System ☐ Repair System Type: I II (III) IV V VI
System Description: 25% REDUCTION, GRAVITY
Repair System Description: 50% REDUCTION, LOW-PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No

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

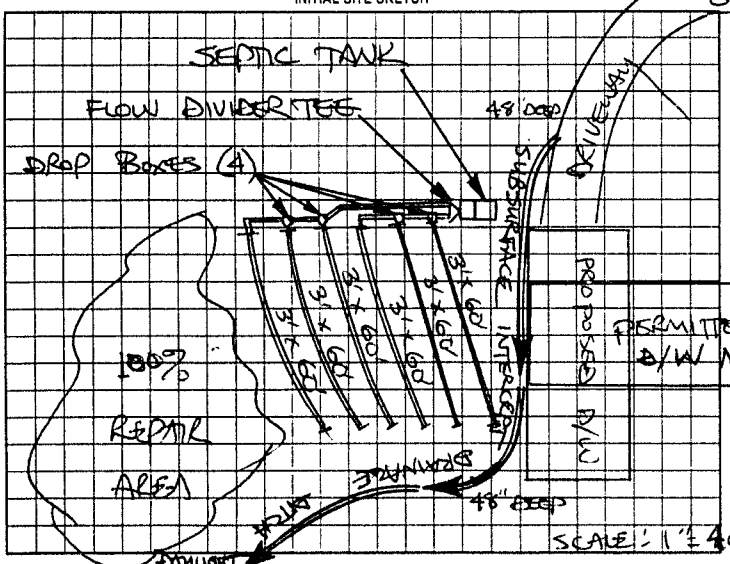
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

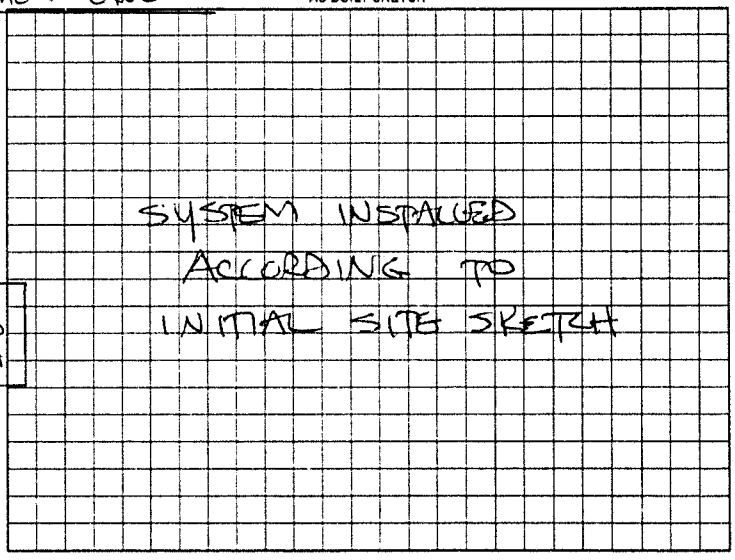
Comments/Conditions: ① INSTALL SUBSURFACE INTERCEPT DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 48" DEEP, AROUND SYSTEM THEN OUT TO DAYLIGHT ② INSTALL 25% REDUCTION SYSTEM USING SIX 3'×60' LINES.

Comments/Conditions: SEPTIC TANK WITH RISERS & MARKER INSTALLED USING "~~[redacted]~~ ZABEL" 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 Fil Fisher date 5-22-02 Installed by: BRENT GALLIHER

Improvement Permit by: STEVE HEDRICK date 5-22-02 Operation Permit by: STEVE HEDRICK date 6-13-02

Authorization to Construct by: STEVE HEDRICK date 5-22-02 Existing System Inspection by: _____ date _____

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