IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093788 PIN# 4784 78 1341 (PART) DATE 2-3-01

OWNER OR CONTRACTOR JANET S. HARKEY PHONE: Business _____ Home 871-8564

ADDRESS 325 BARNHILL ROAD, CLEVELAND, NC 27013

LOCATION US 64 E, TR BARRY OAK RD, TR BARNHILL ROAD, ON LEFT AT COUNTY LINE (~1 MILE)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 3.74 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-28-2000
Pump Tank: 1000 Gallons; PT 17 Date 11-27-00
Pump Make: GOULDS Model WS10J2H Serial No. B0157815
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines SIX Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, (III), V, VI
System Description: CONVENTIONAL PUMP-FED
Repair System Description: LOW PRESSURE PIPE
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
WELL

Comments/Conditions: SEE ATTACHED SHEETS FOR PUMP AND PRESSURE MANIFOLD REQUIREMENTS

Comments/Conditions: SYSTEM INSTALLED WITH MARKEC & POLYLOK FILTER.
LINES, PRESSURE HEAD, & TANKS CHECKED (4-11-01) LC
ELECTRICAL CHECKED (4-11-01) LC

INITIAL SITE SKETCH

SEE ATTACHED SITE SKETCH

AS BUILT SKETCH

SYSTEM INSTALLED AS SHOWN

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: Janet Harkey date _____ Installed by: YOUNTS GRADING

Improvement Permit by: STEVE HEDRICK date 2-3-01 Operation Permit by: [signature] date 04-11-01

Authorization to Construct by: STEVE HEDRICK date 2-3-01 Existing System Inspection by: _____ date _____

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