IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 117627 PIN# 4789-08-8564 6792 DATE 1/15/04

OWNER OR CONTRACTOR PAUL AND GERALDINE LAMBERT PHONE: Business _____ Home 704-546-2312

ADDRESS 106 PAUL JR LN HARMONY 28634

LOCATION US 21 N @ NC 901 @ CRANFILL @ PAUL JR @ END IN PASTURE

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA .908 SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 0.3 gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 8-29-03
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 270
No Lines 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: Con Gravity
Repair System Description: Con Gravity
Maintenance Agreement Required: ☐ Yes ☑ No

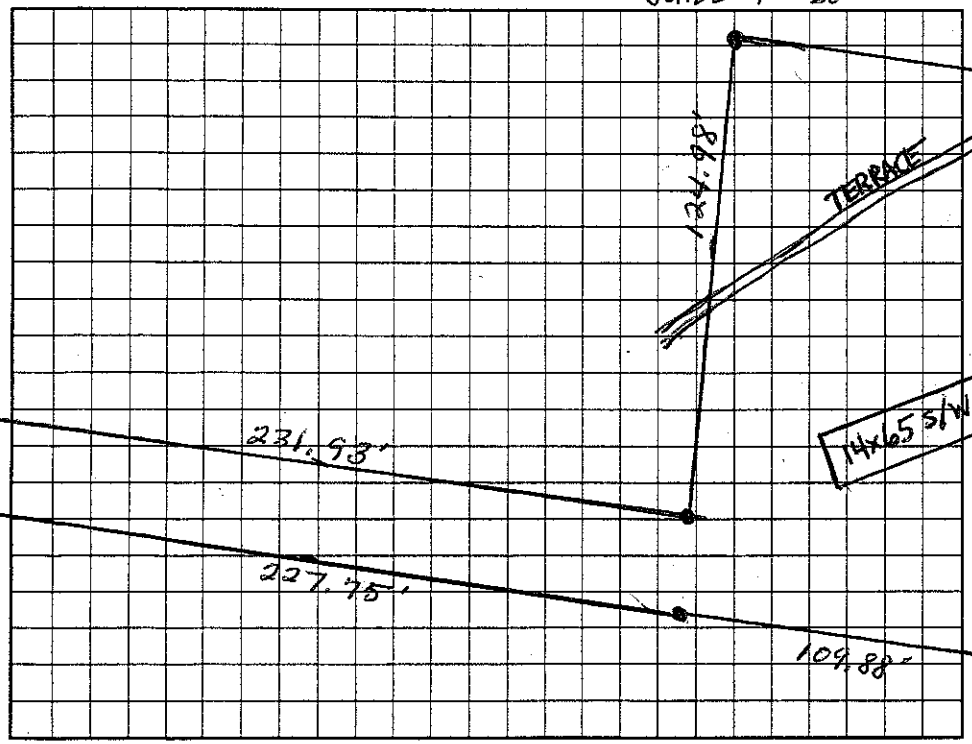
☐ House/Mod. Home No. Bedrooms 2
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

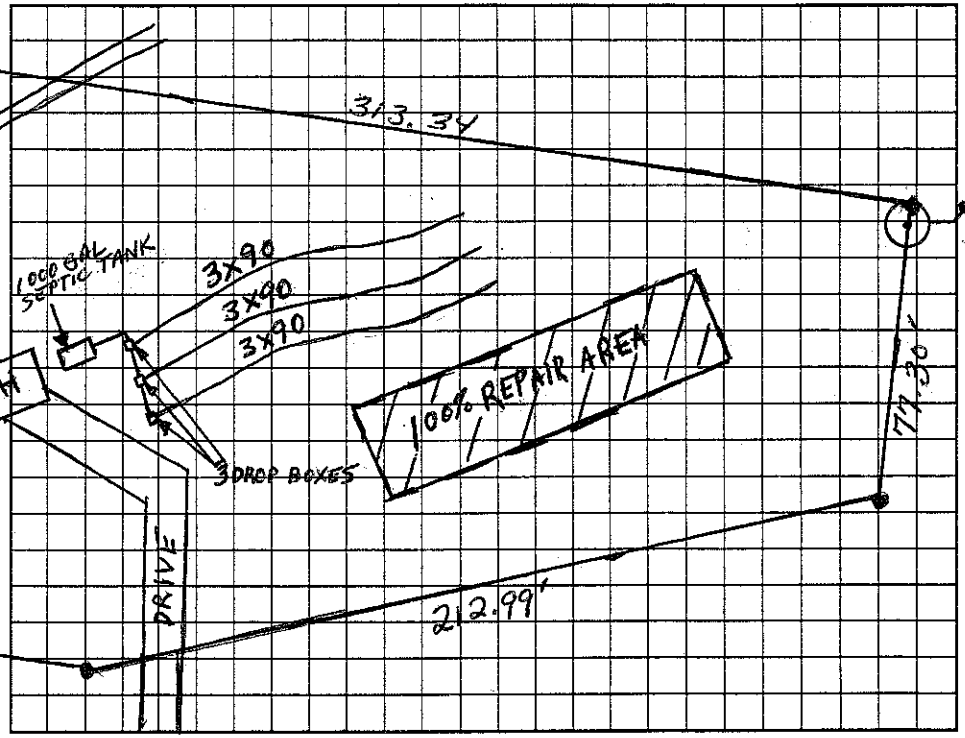
Comments/Conditions: ① INSTALL LINES 24" ON CONTOUR ② MUST MEET ALL SETBACKS ③ INSTALL AS SHOWN

Comments/Conditions: ① TUFF-TITE FILTER ② #5, #57 STONE ③ INSTALLED AS SHOWN.

INITIAL SITE SKETCH SCALE 1" = 50'



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: Nancy Peacock date 1/16/04
Improvement Permit by: Christopher M. Shevill, RS date 1/15/04
Authorization to Construct by: Christopher M. Shevill, RS date 1/15/04

Installed by: A-1 Backhoe
Operation Permit by: Christopher M. Shevill, RS date 2-24-04
Existing System Inspection by: _____ date _____

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