IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# 4799-30-5142 DATE 10-29-02

OWNER OR CONTRACTOR RICHARD NEIL CARTNER PHONE: Business _____ Home 704-546-7228

ADDRESS 1404 E. MEMORIAL HWY HARMONY, NC 28634-9135

LOCATION OLD MOCKSVILLE ROAD NE, TR NC901 , 0.5 MILE ON RIGHT AT BOX # 1404

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 21.7 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons: STB _____ Date _____

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No _____

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 180

No Lines TWO 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: CONVENTIONAL GRAVITY

Maintenance Agreement Required Yes ~~No~~

~~House/Mod Home~~ No. Bedrooms 3

Mobile Home No. Bathrooms 2

Business No. Employees _____

Other _____

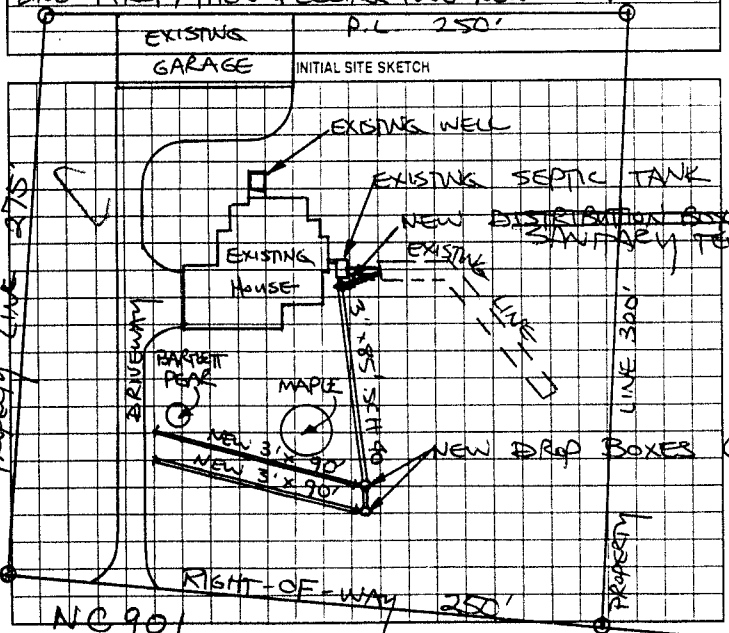
Slab ~~Crawl Space~~ Basement w/plumbing Basement wo/plumbing

Water Supply: ☐ Individual ☑ ~~Public~~ ☐ Community

Comments/Conditions: INSTALL NEW DISTRIBUTION BOX FEEDING OLD LINE FIRST, THEN FEEDING TWO NEW 3'x90' LINES

Comments/Conditions USE 32 OUNCES COPPER SULFATE ANNUALLY TO NIP BACK NEW ROOT GROWTH

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM REPAIRED ACCORDING TO INITIAL SITE SKETCH EXCEPT NEW DISTRIBUTION BOX NOT INSTALLED (NEW SANITARY TEE USED INSTEAD)

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: Richard N. Cartner date Oct. 29, 2002 Installed by: SAMMY REALS

Improvement Permit by: STEVE HEDRICK date 10-29-02 Operation Permit by: STEVE HEDRICK date 11-4-02

Authorization to Construct by: STEVE HEDRICK date 10-29-02 Existing System Inspection by: _____ date _____

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