IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 086285 PIN# 4779 49 5311 DATE 11-19-99

OWNER OR CONTRACTOR JEFFERY CRUTCHFIELD PHONE: Business Home 546-2355

ADDRESS 270 PINEY GROVE ROAD, HARMONY, NC. 28634

LOCATION US21N, TR NC901, TL GUILFORD, TL FOX HUNTER, TR PINEY GROVE, 0.7 MILE ON RIGHT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.00 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R.

Septic Tank: 1000 Gallons; STB 1012 Date 10-20-99
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines SIX 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: 25% REDUCTION 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 2
☐ Business No. Employees
☐ Other

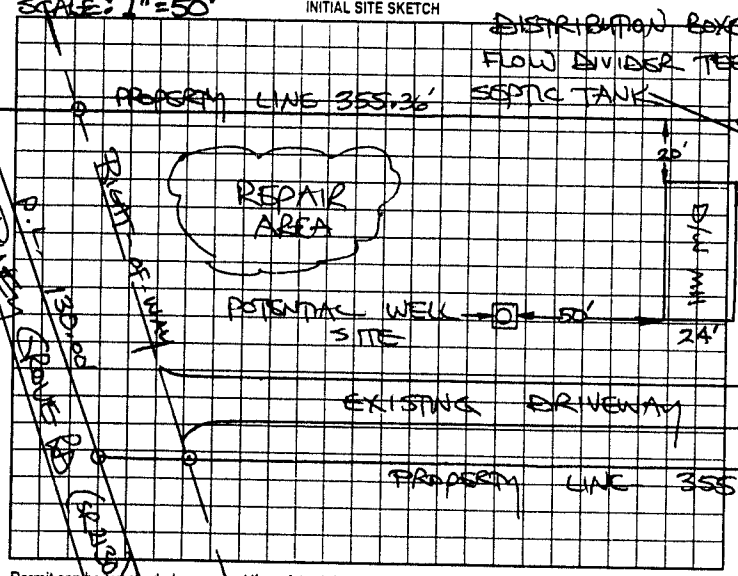
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL.

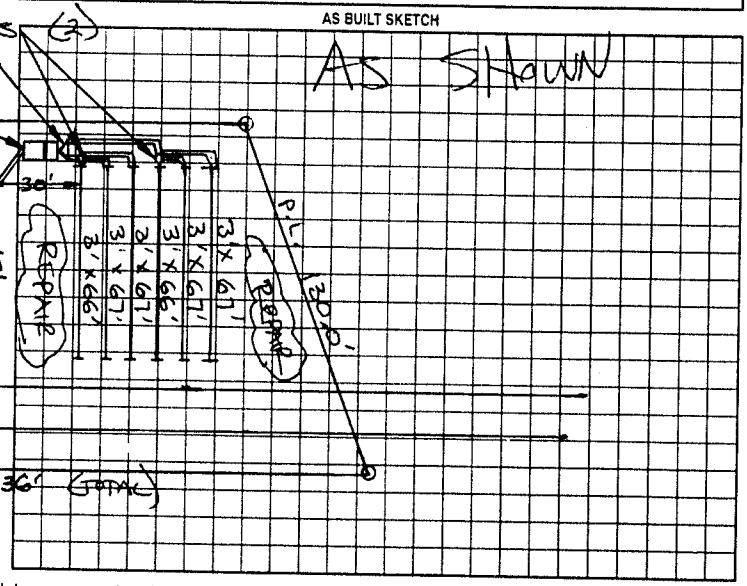
Comments/Conditions: SEPTIC TANK WITH RISERS INSTALLED USING "POLYLOK" FILTER

SCALE: 1" = 50'

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: +Chad R. [illegible] date 11-19-99

Improvement Permit by: STEVE HEDRICK date 11-19-99

Authorization to Construct by: STEVE HEDRICK date 11-19-99

Installed by: A-1 BACKHOE

Operation Permit by: STEVE HEDRICK date 11-29-99

Existing System Inspection by: date

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