IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# LOVE VALLEY PIN# 4812 10 0202 DATE 5-7-99

OWNER OR CONTRACTOR ROBERT W. PAYNE PHONE: Business Home 592-4833

ADDRESS 277 MITCHELL TRAIL, LOVE VALLEY, NC 28625

LOCATION NC 115 N, TL MTN VIEW RD, TR LOVE VALLEY RD, TL MITCHELL TRAIL, ON LEFT AT BOX 277

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA AMPLE SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.30 gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 4-17-99
Pump Tank: 1000 Gallons; PT 17 Date 5-27-99
Pump Make: Hydromatic Model SHEF50M Serial No. 5186200?
Nitrification Field: No Fields Square Feet 810+ Linear Feet 280+
No Lines ~~Five~~ 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, PUMP
Repair System Description: CONV, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No

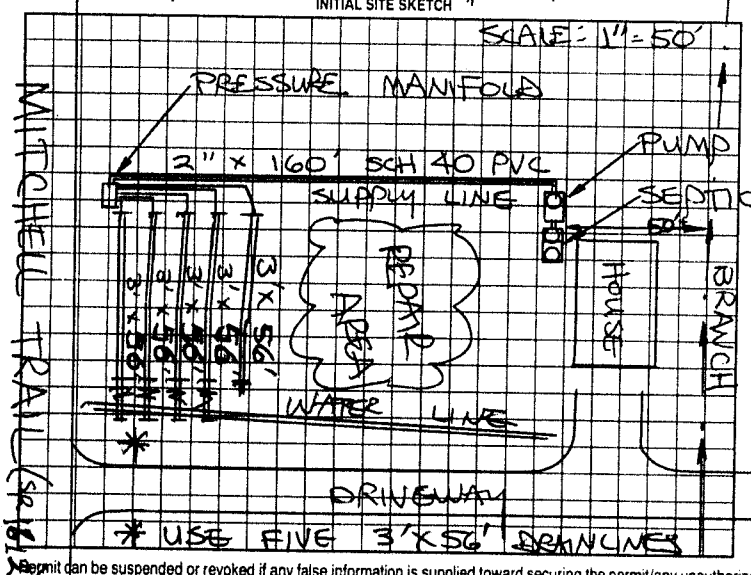
☑ House/Mod. Home No. Bedrooms 2
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

Comments/Conditions: ① ABANDON EXISTING UNPERMITTED SYSTEM ② SEE ATTACHED SHEETS FOR PUMP AND PRESSURE MANIFOLD REQUIREMENTS ③ SIZE PUMP TO DELIVER 36 GPM AT 38 TDH

Comments/Conditions

INITIAL SITE SKETCH



AS BUILT SKETCH

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: Betty J. Payne date 5-10-99 Installed by: Steve Jordan

Improvement Permit by: STEVE HEDRICK date 5-7-99 Operation Permit by: Mf Conf RS date 6-3-99

Authorization to Construct by: STEVE HEDRICK date 5-7-99 Existing System Inspection by: _____ date _____

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