IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 086466 PIN# 4813719440 DATE 12-9-99

OWNER OR CONTRACTOR LACY SHUMAKER PHONE: Business _____ Home 592-2770

ADDRESS 301 TAYLOR SPRINGS ROAD, UNION GROVE, NC 28689

LOCATION NC 115 North, TL TAYLOR SPRINGS ROAD, TR RACE PATH ROAD, 0.3 MILE, ON RIGHT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 7.0 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.35 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 7-27-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345
No Lines THREE Trench Width 36" Max Trench Bottom Depth 32"

☒ 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
Gravel Depth 12"

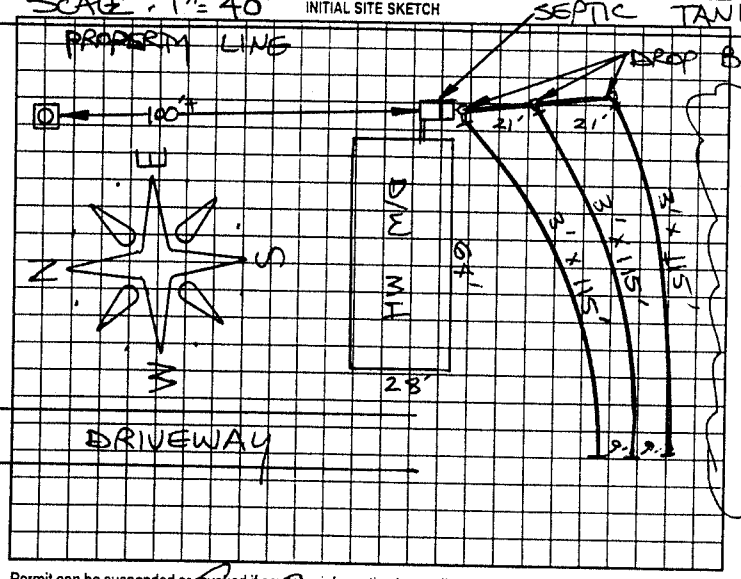
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community
WELL

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

Comments:/Conditions: SEPTIC TANK W/ RISER INSTALLED USING "POLYLOK" FILTER

SCALE: 1" = 40' INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: _____ date 12-9-99 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 12-9-99 Operation Permit by: STEVE HEDRICK date 12-15-99

Authorization to Construct by: STEVE HEDRICK date 12-9-99 Existing System Inspection by: _____ date _____

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