IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 26164 (01XX51) DATE 2-27-97 TAX MAP NO. 15J-A-73 (PIN# 4824 60 7978) Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR WARREN BARKER PHONE: Business Home (704) 938-2711

ADDRESS 305 OAKDALE AVE, KANNAPOLIS, NC 28083

LOCATION NC 115N, TR NC 901, TL GRASSY KNOB, TL ZEB ROAD, 0.9 MILE ON RIGHT (AT CREEK)

SUBDIVISION ROCKY BROOK BLOCK / SECTION ____ LOT 3 LOT AREA 4.705 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.33 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 3-20-98
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 30" 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

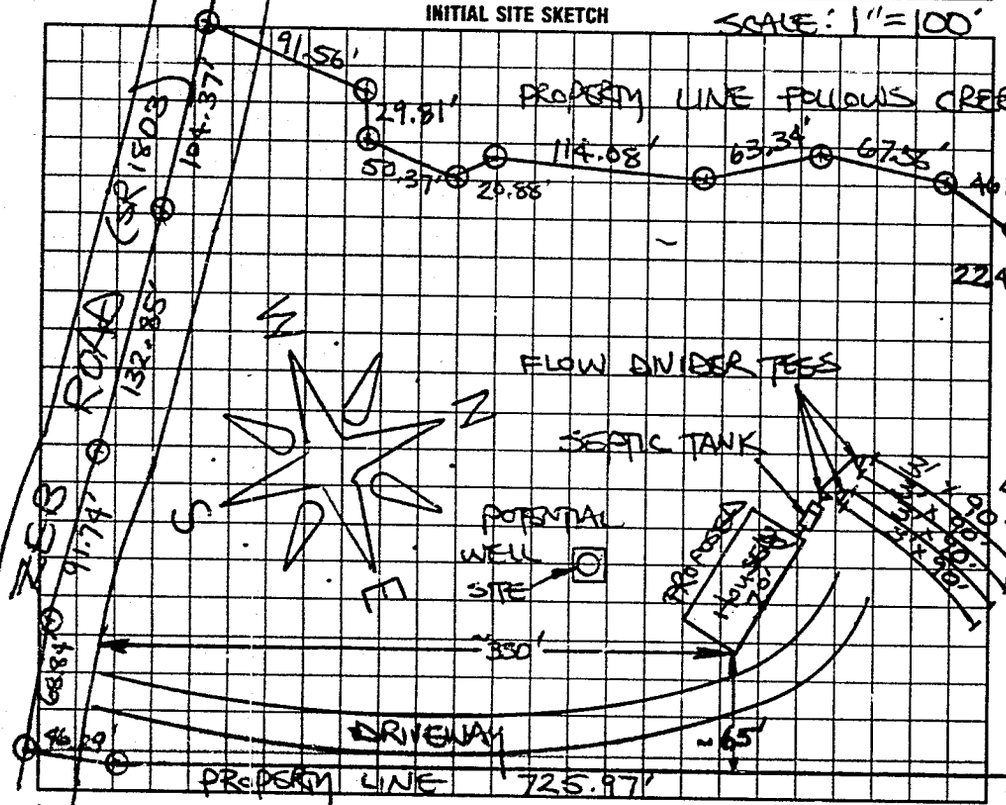
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☒ Other ____
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☒ Individual
☐ Community
☐ Public
WELL

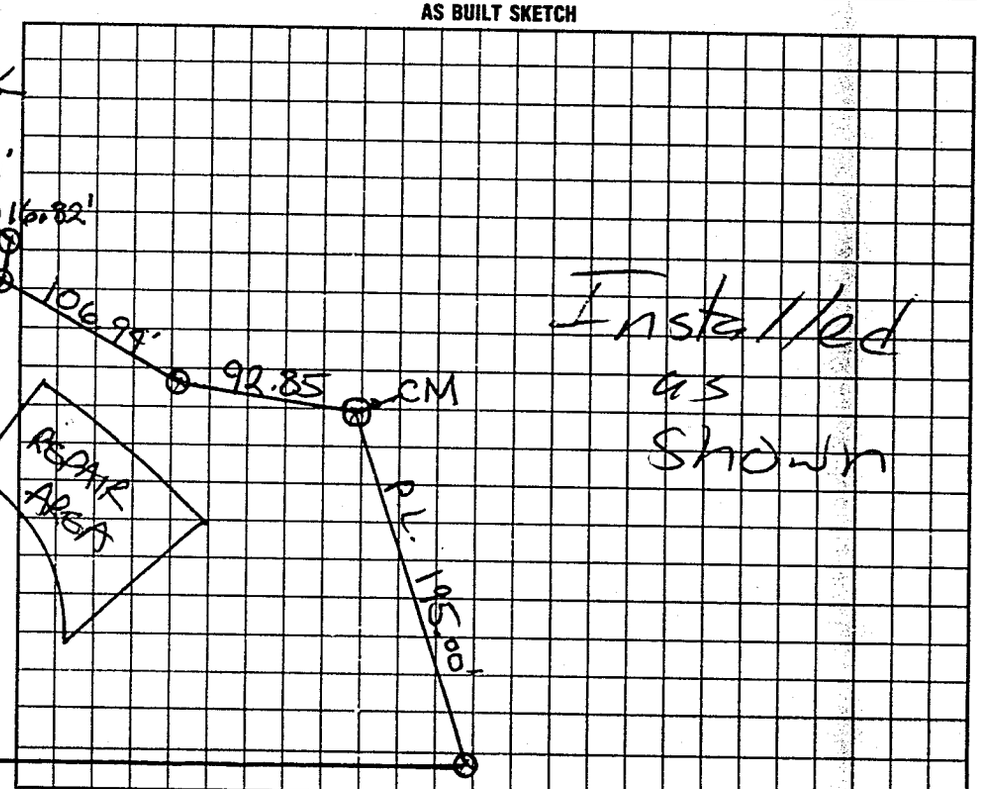
Comments: ① KEEP SYSTEM MINIMUM 100' FROM WELL SITE
② INSTALL LINES ON CONTOUR, NO DEEPER THAN 30"
③ USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR 3'x90' LINES

Comments:

INITIAL SITE SKETCH SCALE: 1"=100'



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: [signature]

Improvement Permit by: STEVE HEDRICK date 2-27-97

AUTHORIZATION TO CONSTRUCT Existing System Inspection by: STEVE HEDRICK date 2-27-97

Installed by: A-1 Backhoe

~~Certificate of Completion by:~~ ____ date ____

Operation Permit by: Mat Conyers date 5-22-98

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