IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C) MOORESVILLE 704-664-5281

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

PERMIT# 105369 PIN# 4834-43-0255 DATE 3-27-02

OWNER OR CONTRACTOR ARCHIE HARROLD PHONE: Business 704-872-9528 Home 704-592-5426

ADDRESS 452 BUTCH BRANCH ROAD, UNION GROVE NC 28689

LOCATION NC 115 N, TR NC901, TL GRASSY KNOB ROAD, 1.2 MILES ON RIGHT, BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 32 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 620 Date 8-27-01
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 16000 Linear Feet 540
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: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

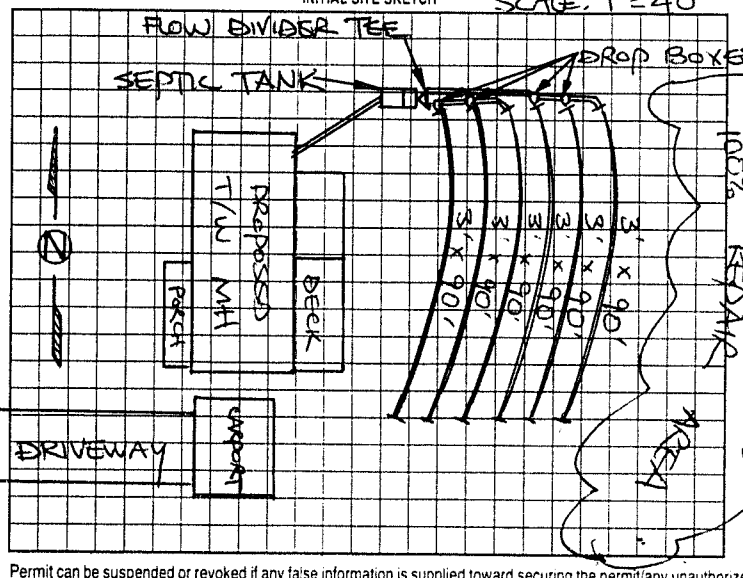
☐ House/Mod. Home No. Bedrooms 4
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply:
☒ Individual
☐ Public
☐ Community
WELL

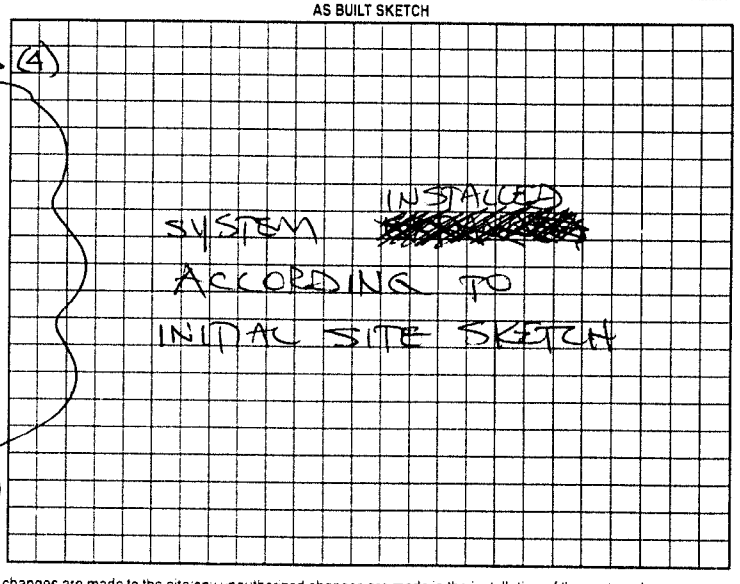
Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL & USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES FEEDING LINES AS SHOWN

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

INITIAL SITE SKETCH SCALE: 1"=40'



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: _____ date 3-27-02 Installed by: [redacted] TOMMY NIXON

Improvement Permit by: STEVE HEDRICK date 3-27-02 Operation Permit by: STEVE HEDRICK date 4-3-02

Authorization to Construct by: STEVE HEDRICK date 3-27-02 Existing System Inspection by: _____ date _____

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