IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 4-13-00

PERMIT# 088408 PIN# 4842 57 8417

OWNER OR CONTRACTOR JAMES TEMPLETON PHONE: Business 528-4516 Home 539-4431

ADDRESS 185 DAYTONA CIRCLE UNION GROVE, NC 28689

LOCATION US 21 N, TL JENNINGS RD, TR INDIAN HILL ROAD, TR DAYTONA CIRCLE, MH SITE AT END

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 21 ACRES SITE CLASS PS DESIGN FLOW 300 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 794 Date 5-28-99

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

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, GRAVITY

Repair System Description: CONVENTIONAL, GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

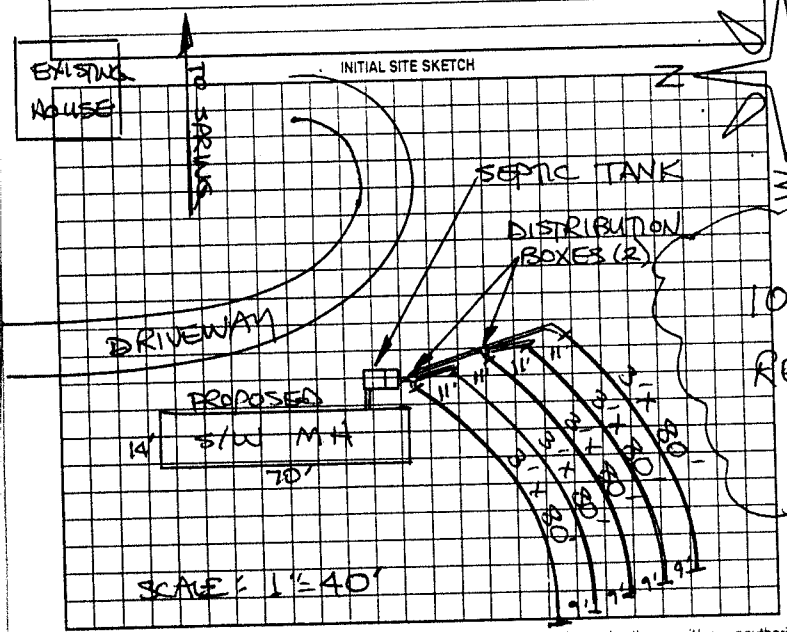
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community SPRING

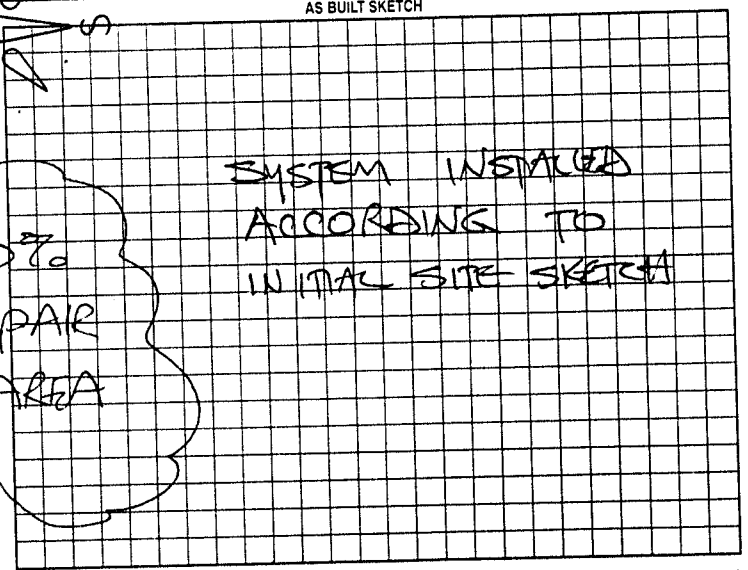
Comments:/Conditions:

Comments /Conditions: SEPTIC TANK W/ MARKER INSTALLED USING "ZABEL" FILTER

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: _____ date 4-18-00 Installed by: LARRY TUCKER, SEPTIC TANK SERVICE

Improvement Permit by: STEVE HEDRICK date 4-13-00 Operation Permit by: STEVE HEDRICK date 4-19-00

Authorization to Construct by: STEVE HEDRICK date 4-13-00 Existing System Inspection by: _____ date _____

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