IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 079244 PIN# 4843630693 (PART) DATE 2-15-99

OWNER OR CONTRACTOR JERRY DAVIS OSBORNE PHONE: Business Home 539-5218

ADDRESS 3512 JENNINGS ROAD, UNION GROVE, NC 28689

LOCATION I-77 N, TL NC 901, TL JENNINGS RD, LOT ON LEFT PAST 1ST HOUSE ON LEFT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 2.00 ACRES SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.30 gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 5-7-99
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

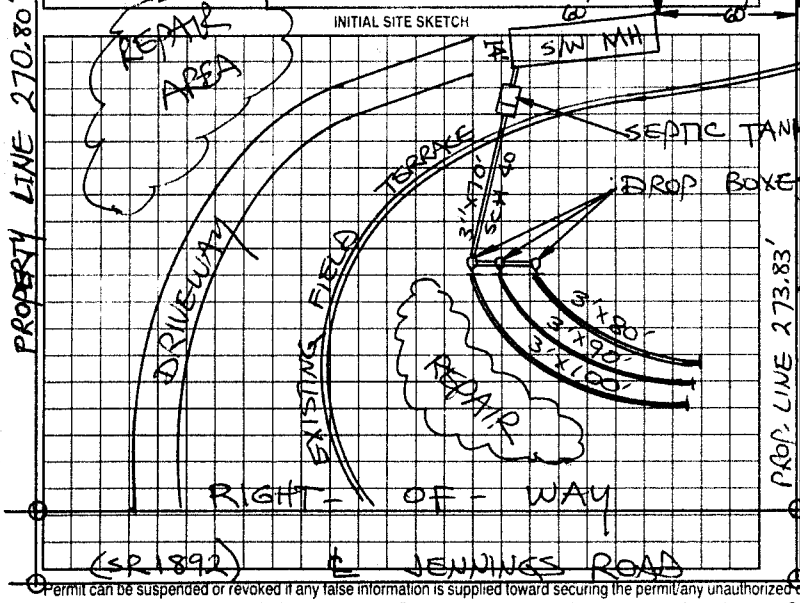
☑ New System ☐ Repair System Type: (I) II III IV V VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ House/Mod Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 2 No. Bathrooms 1 No. Employees
Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments/Conditions: SCALE: 1"=60'

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

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITAL 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: Paulette C. Osborne date 2-16-99 Installed by: KENNY MADISON

Improvement Permit by: STEVE HENDRICK date 2-15-99 Operation Permit by: STEVE HENDRICK date 7-2-99

Authorization to Construct by: STEVE HENDRICK date 2-15-99 Existing System Inspection by: date

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