IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 083881 PIN# 4851 63 8369 (PART) DATE 10-12-99

OWNER OR CONTRACTOR JAMES HARNER PHONE: Business 872-8916 Home 546-5194

ADDRESS 204 SHEFFIELD ROAD, HARMONY, NC 28634

LOCATION US 21 N, TL TABOR ROAD, TL WILLIAMSBURG RD, BEAR RIGHT ON SLOAN WOOTEN RD, 2ND ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 23.02 ACRES SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.33 gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 1-25-00

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No _____

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth 12"

✓ New System ☐ Repair System Type: ☐ II ☐ III ☐ IV ☐ V ☐ VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ✓ No

✓ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3½

☐ Business No. Employees _____

☐ Other _____

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

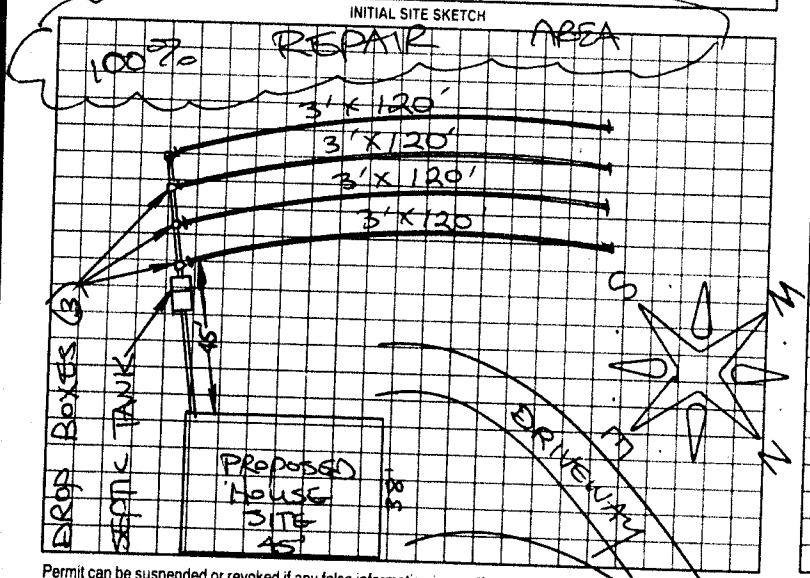
Water Supply: ☐ Individual ✓ Public ☐ Community

Comments/Conditions: INSTALL DRAINLINES ON CONTOUR, AS FLAGGED, NO DEEPER THAN 28"

Comments/Conditions: SEPTIC TANK W/ RISERS INSTALLED USING "POLY LOK" FILTER

BACK OF ROAD

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: James R. Harner date 10-12-99 Installed by: BRENT GALLIHER

Improvement Permit by: STEVE HEDRICK date 10-12-99 Operation Permit by: STEVE HEDRICK date 5-4-00

Authorization to Construct by: STEVE HEDRICK date 10-12-99 Existing System Inspection by: _____ date _____

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