IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 215334

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

PIN # 4852617935

APPLICANT: Rosie + Michael Bailey APPLICANT ADDRESS: 125 Barley Run Salisbury NC 28147

SITE ADDRESS: 599 Jericho Rd / Harmony NC PHONE: 704-797-0697 ALT. PHONE: 704-902-8296

SITE DIRECTIONS: 77N T/R on 901 T/L Jericho Rd Lot on right

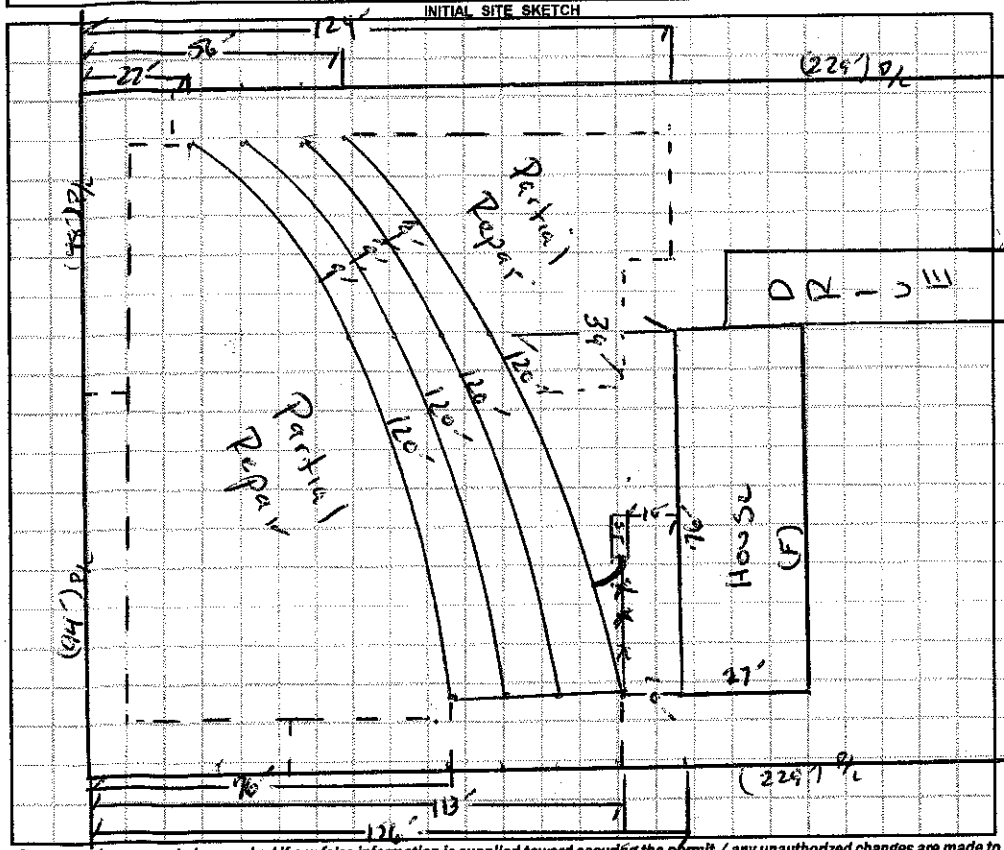
SUBDIVISION: Jericho Heights SECTION: N/A LOT # 4 LOT AREA: 0.75ac DESIGN FLOW: 480 L.T.A.R.: 0.25

Septic Tank	1000 (gal)	STB	760	Date	9-2-15	[X] New System [ ] Repair [ ] Expansion	System Type: I II [III] IV V VI	[X] Residence	No. Bedrooms 4
Pump Tank	N/A (gal)	PT	N/A	Date	N/A	System Description:	25% Reduction	[ ] Business	No. Persons 8
Pump Make	N/A	Model	POW/ER	Serial #	PL-06	Repair System Description:	50% Reduction	[ ] Other	No. Employees
# Nitrification Fields	1	# Lines	4	Linear Ft:	480	Maintenance Agreement Required:	[ ] YES [X] NO	[ ] Slab	[X] Crawl Space
Trench Width	36"	Max. Trench Bottom Depth	36"	Gravel Depth	N/A	[X] GRAVITY	[ ] PRESSURE	[ ] Basement w/plumbing	[ ] Basement w/o plumbing

Water Supply: [ ] Private [X] Public [ ] Community

Comments / Conditions: Install 25% reduction on contour with Serial distribution.

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed Quick 4 as drawn

No home at time of installation

Installed during rainfall event

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. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

[ ] **IMPROVEMENT PERMIT** *with plat valid without expiration.* [X] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [X] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 1-8-16 Installed by: A-1 Backhoe

IMPROVEMENT PERMIT by: Date: 01/08/16 OPERATION PERMIT by: Date: 01/15/16

AUTHORIZATION TO CONSTRUCT by: Date: 01/13/16 Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK