IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 119180 PIN# 4852-71-4925.001 4852-72-2087 DATE 3-18-04

OWNER OR CONTRACTOR RONALD FULLWOOD PHONE: Business 336-372-5521 EXT. 228 Home 704-539-5420

ADDRESS 478 LAKE MULLIS ROAD, HARMONY, NC 28634

LOCATION I-77 NORTH, TR NC 901, TR JERICHO ROAD, TL LAKE MULLIS ROAD, 0.1 MILE ON LEFT

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA LIMITED SITE CLASS. P DESIGN FLOW 360 L.T.A.R. 0.40 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 2-4-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
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: 25% REDUCTION, PUMP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

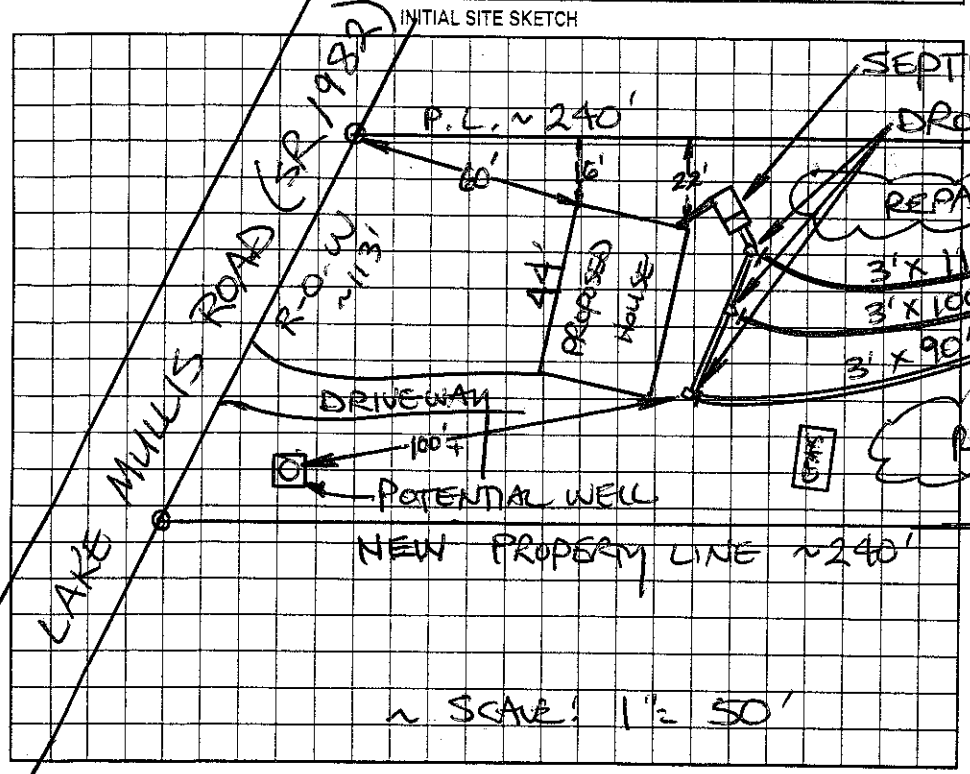
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

Water Supply: ☑ Individual ☐ Public ☐ Community WELL

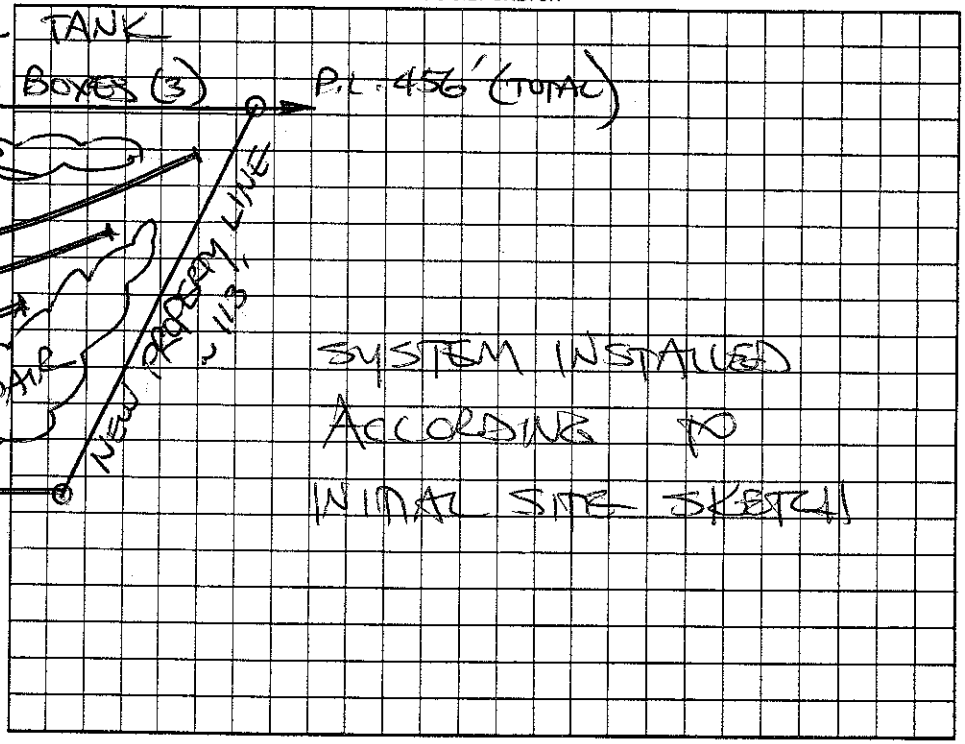
Comments:/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL (15A NCAC. 18A .1956 (6)(B)(G))

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFTITE" FITTINGS

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: + Ronald Fullwood date 3-18-04 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 3-18-04 Operation Permit by: STEVE HEDRICK date 6-18-04

Authorization to Construct by: STEVE HEDRICK date 3-18-04 Existing System Inspection by: _____ date _____

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