IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 10-25-99

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

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

PERMIT# 082674 PIN# 4860 39 8531 (PART) DATE 11-30-99

OWNER OR CONTRACTOR JOHNNIE GARDNER PHONE: Business (828) 465-2880 Home

ADDRESS P.O. BOX 5431 CONOVER, NC 28613

LOCATION US 21 NORTH, TL TABOR ROAD, TL CANFIELD DRIVE, LOT ON RIGHT NEAR END AT CURVE

SUBDIVISION HEATHSTEAD BLOCK / SECTION LOT 9 LOT AREA 1.75 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GAD FT²

Septic Tank: 1000 Gallons. STB 55 Date 10-18-99

Pump Tank: 1000 Gallons; PT 32 Date 7-30-99

Pump Make: EQUALS Model WE0311M Serial No. L9995014

Nitrification Field: No Fields 1 Square Feet Eq. To 200 Linear Feet 320

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 22" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: PUMP TO 2012 HORIZONTAL HDS

Repair System Description: PUMP TO 25% REDUCTION

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

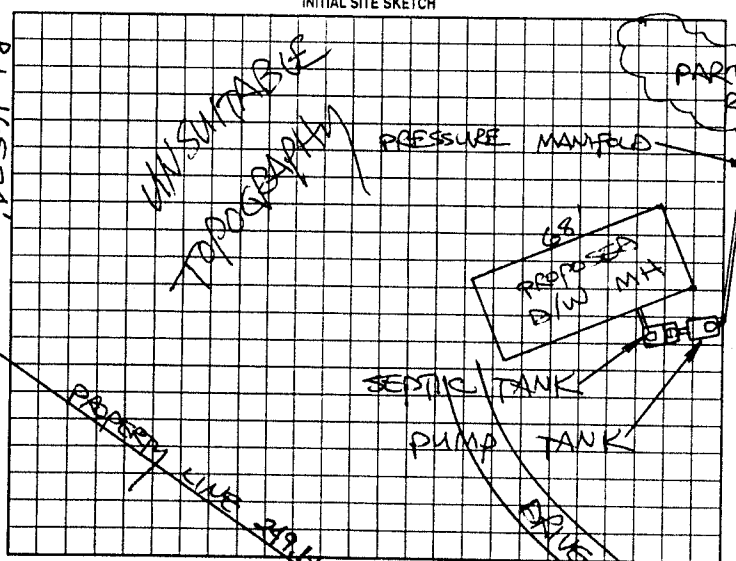
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

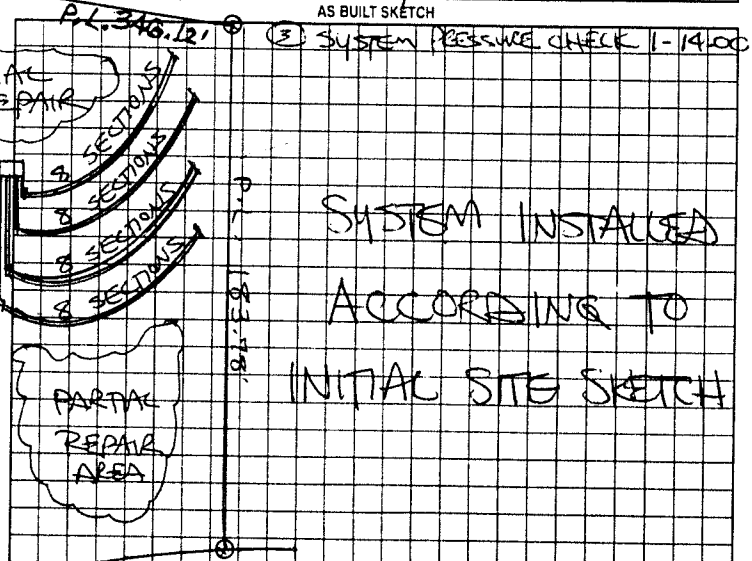
Comments/Conditions: ① SEE ATTACHED SHEETS FOR PUMP & PRESSURE MANIFOLD REQUIREMENTS. ② INSTALL THIRTY-TWO (32) HDS SECTIONS IN 2012 HORIZONTAL CONFIGURATION IN 4 EQUAL LENGTH LINES

Comments/Conditions: ① SEPTIC TANK W/ RISERS INSTALLED USING "ZABEL" FILTER, TANKS & LINES INSPECTED 12-2-99 ② SYSTEM NEEDS PRESSURE CHECK, ELECTRICAL CHECK, ALARM CHECK. ③ SYSTEM PRESSURE CHECK 1-14-00

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 12/1/99 Installed by: HARVEY LEATHERMAN

Improvement Permit by: STEVE HEDRICK date 11-30-99 Operation Permit by: STEVE HEDRICK date 1-31-00

Authorization to Construct by: STEVE HEDRICK date 11-30-99 Existing System Inspection by: _____ date _____

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