IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125486 PIN# 4862-56-8653 616-2486 DATE 1/6/05

OWNER OR CONTRACTOR ROGER D. KENNEDY PHONE: Business _____ Home (704) 546-2239

ADDRESS 4062 HARMONY HWY HARMONY NC 28634

LOCATION I-77N TO EXIT 65 TR HWY 901 TL EAGLE MILLS 1/2 MI ON LEFT PAST NURSERY

SUBDIVISION Kennedy Property BLOCK / SECTION _____ LOT 1 LOT AREA 10.00 SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 0.30 gpd/ft²

Septic Tank: 1000 Gallons; STB 620 Date 8-4-04

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 270'

No Lines 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: PUMP 25% REDUCTION

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 2

☑ Mobile Home No. Bathrooms ____

☐ Business No. Employees ____

☐ Other _____

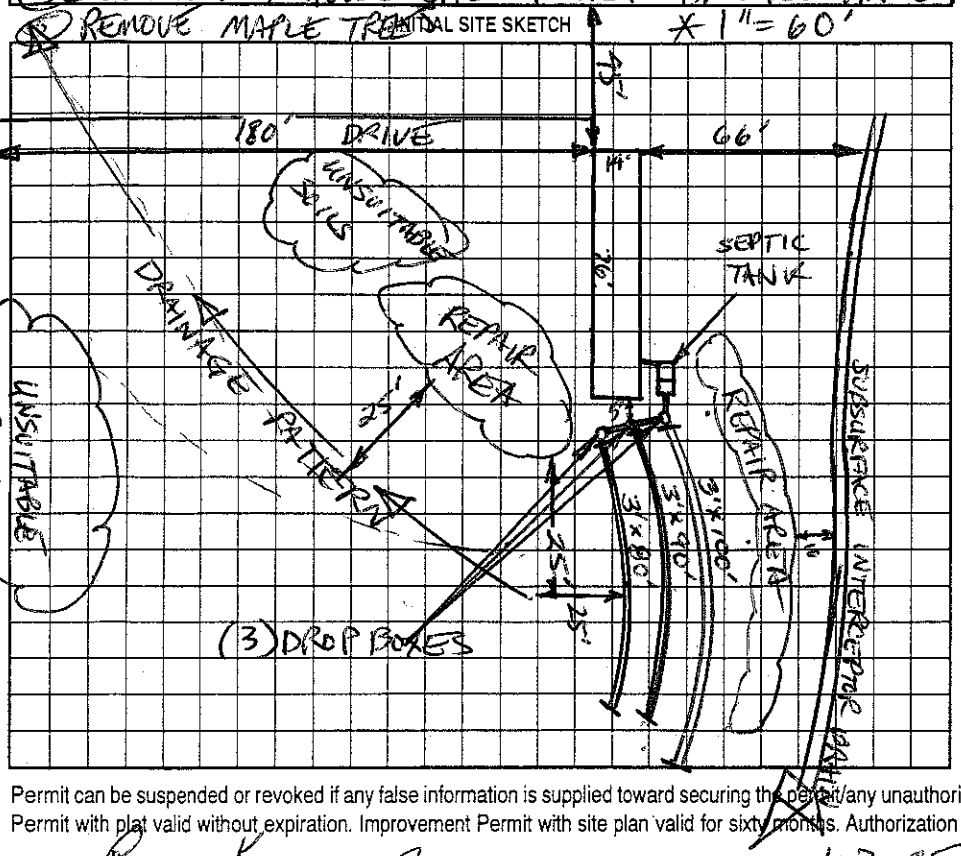
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions (1) INSTALL LINES 24" ON CONTOUR (2) MAINTAIN SETBACKS (3) INSTALL SUBSURFACE INTERCEPTOR DRAIN 48" TO DAYLIGHT (4) ELEVATION OF HOUSE SITE CRITICAL OR WILL HAVE TO PUMP (5) REMOVE MAPLE TREE

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

INITIAL SITE SKETCH * 1" = 60'



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL 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: Roger Kennedy date 1-7-05 Installed by: SAMMY REAVIS

Improvement Permit by: Christopher M. Shaw, LHS date 1/6/05 Operation Permit by: STEVE HEDRICK date 2-11-05

Authorization to Construct by: Christopher M. Shaw, LHS date 1/6/05 Existing System Inspection by: _____ date _____

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