IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# REPAIR PIN# REPAIR DATE 3/23/00

OWNER OR CONTRACTOR JERRY CAMPBELL PHONE: Business ~~546-2616~~ 873-6401 Home 546-2616

ADDRESS 260 ALLEN ROAD / 155 DOBY RD HARMONY

LOCATION 2IN - TL 901 - TR ALLEN RD - (# 260) 4th [redacted] ON RT

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA ~4.5 AC SITE CLASS #5 DESIGN FLOW 240 GPD L.T.A.R. .36 gal/ft²

Septic Tank: 1000 Gallons; STB 620 Date 2-2-2000
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No. Fields 1 Square Feet 0533 Linear Feet 270
No. Lines 3@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☒ Repair System Type: I (II) III, IV, V, VI
System Description: ____
Repair System Description: GRAVITY CONVENTIONAL
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

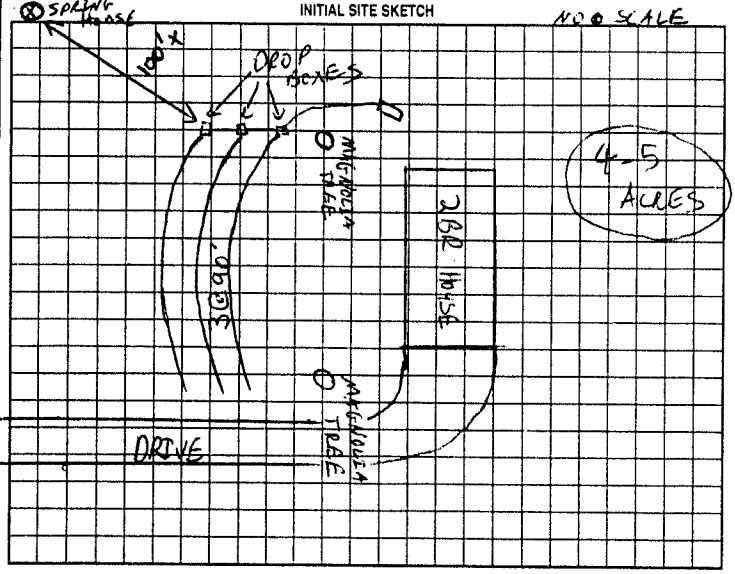
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other ____

Water Supply: ☒ Individual ☐ Public ☐ Community SPRING

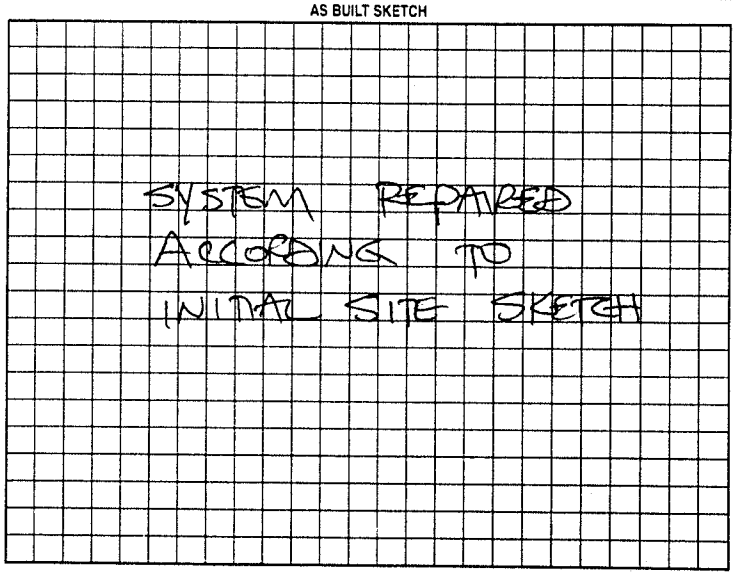
Comments/Conditions: 1) REPLACE OLD TANK IF IN BAD CONDITION.
2) COULD NOT LOCATE EXISTING SYSTEM OR TANK.
3) KEEP SYSTEM 100'+ FROM SPRING HOUSE, IT IS USED AS A DRINKING SOURCE.

Comments/Conditions: NEW SEPTIC TANK W/ RISERS INSTALLED USING "ZABEL" FILTER

INITIAL SITE SKETCH — NO SCALE



AS BUILT SKETCH



(#260) ALLEN ROAD

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: Jerry Campbell date 3/23/00 Installed by: SAMMY BEAVLS

Improvement Permit by: [signature] RS date 3/23/00 Operation Permit by: STEVE HEDRICK date 5-1-00

Authorization to Construct by: [signature] RS date 3/23/00 Existing System Inspection by: ____ date ____

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