IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 083495 PIN# 4863 77 1166 (PART) DATE 9-8-99

OWNER OR CONTRACTOR HENRY NICHOLSON PHONE: Business Home 539-4461

ADDRESS 205 HOLCOMB ROAD, HAMPTONVILLE, NC 27020

LOCATION I-77 N, TR NC901, TL EAGLE MILLS, TL HOLCOMB ROAD, TR LELAND LANE, LOT AT END ON (L)

SUBDIVISION BLOCK / SECTION LOT 5 LOT AREA 0.516 ACRE SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 960 Date 7-26-99
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No
Nitrification Field: No Fields 1 Square Feet 69, T 810 Linear Feet 200+
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth SAND 6"

✓ New System Repair System Type: I II (III) IV V VI
System Description: 25% REDUCTION GRAVITY
Repair System Description: 50% REDUCTION PUMP
Maintenance Agreement Required Yes ✓ No

House/Mod. Home No. Bedrooms 2
✓ Mobile Home No. Bathrooms 2
Business No. Employees
Other

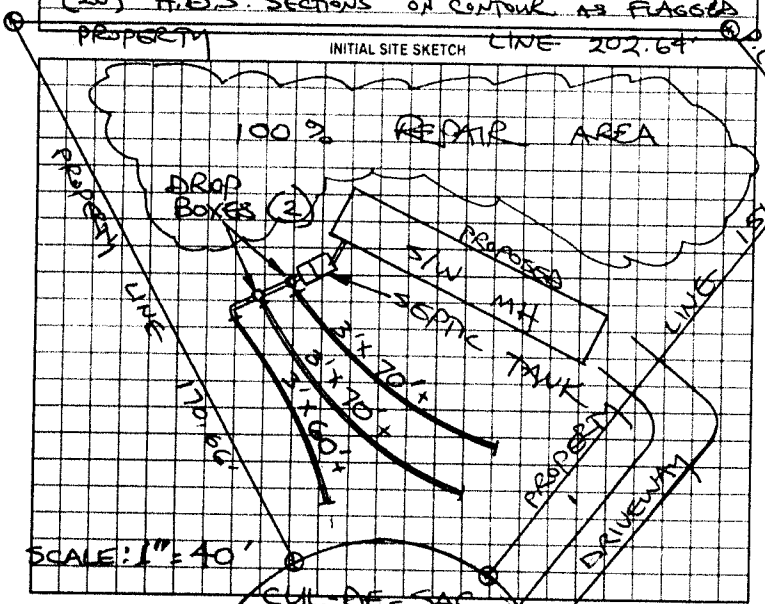
Slab ✓ Crawl Space Basement w/plumbing Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community SPRING

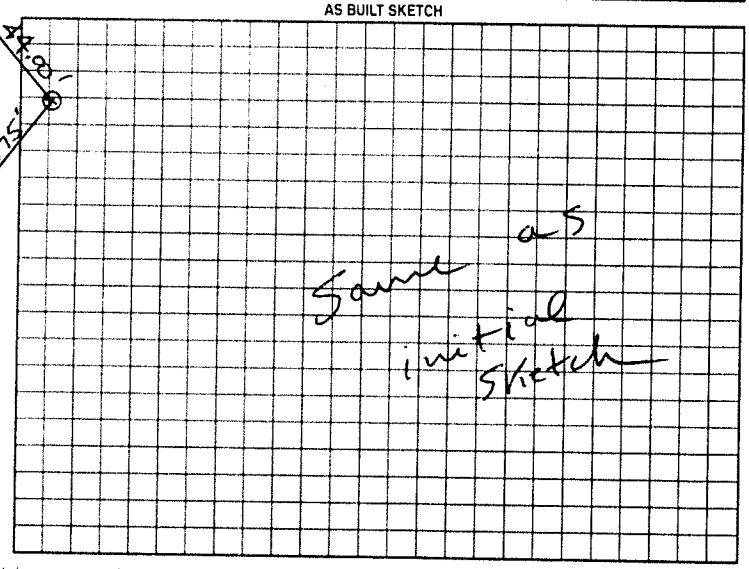
Comments/Conditions: INSTALL 25% REDUCTION SYSTEM USING THIRTY-THREE (33) CHAMBERS OR TWENTY (20) H.D.S. SECTIONS ON CONTOUR AS FLAGGED

Comments/Conditions: 51250 FOR TWO-BEDROOMS ONLY

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: J. C Nicholson date

Improvement Permit by: STEVE HEDRICK date 9-8-99

Authorization to Construct by: STEVE HEDRICK date 9-8-99

Installed by: Billy Grimes

Operation Permit by: R. C Moore date 9-14-99

Existing System Inspection by: date

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