*THIS PERMIT REPLACES VOIDED PERMIT DATED 1-5-04

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# ~~[redacted]~~ 117004 PIN# 4870-16-9867 DATE 12-3-04

OWNER OR CONTRACTOR SAMUEL TOMLIN PHONE: Business (704) 902-4618 Home (704) 546-2110

ADDRESS 280 TOMLIN RD HARMONY 28634

LOCATION 21N ON TOMLIN PROPERTY ON R 0.7 MILE AT BOX # 280

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.878 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3 GPD/FT²

Septic Tank: EXIST Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet EQ 1200 Linear Feet 200

No Lines 2 Trench Width 36" Max Trench Bottom Depth 24' Gravel Depth 12"

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

System Description: CONV GRAVITY

Repair System Description: CONVENTIONAL GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other _____

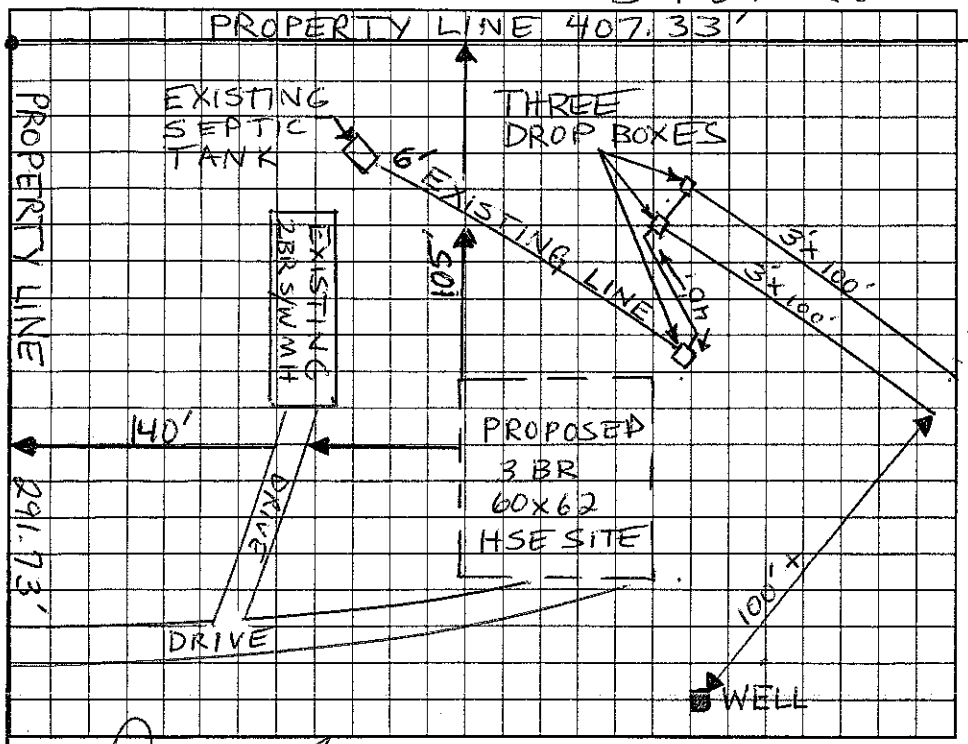
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☑ Community

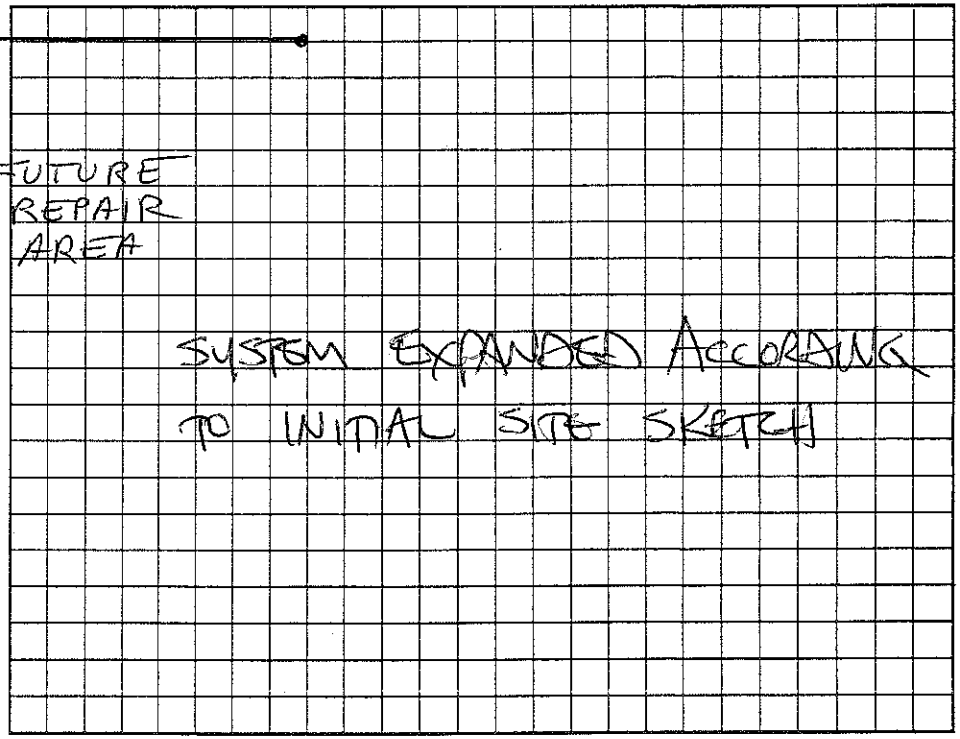
Comments:/Conditions: (1) EXISTING SYSTEM FUNCTIONING PROPERLY @ TIME OF INSPECTION (2) INSTALL LINES ON CONTOUR ACCORD. TO SKETCH (3) REPAIR WILL GIVE TOTAL OF 400' SEPTIC LINE (4) EXISTING S/W MH MUST BE DISCONNECTED/REMOVED FROM PROPERTY.

Comments:/Conditions:

INITIAL SITE SKETCH SCALE 1" = 60'



AS BUILT SKETCH



TOMLIN ROAD (SR 1843)

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: Jim Gibson date 2/3/2004 Installed by: STEVE JORDAN / PIEDMONT

Improvement Permit by: Christopher M. Sherrill, R.S. date 2-3-04 Operation Permit by: STEVE HEDRICK date 6-10-04

Authorization to Construct by: Christopher M. Sherrill, R.S. date 2-3-04 Existing System Inspection by: _____ date _____

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