IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# _____ PIN# _____ DATE 10-6-99

OWNER OR CONTRACTOR CHARLIE GREGG PHONE: Business 546-2168 Home _____

ADDRESS P.O. Box 652 STATESVILLE, NC 28687

LOCATION US 21 North, "STOP-A-LOT" CONVENIENCE STORE ON LEFT IN HARMONY NEXT TO GALAXY SUPERMARKET

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA LIMITED SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.20 GPD/FT²

Septic Tank: EXISTING Gallons: STB _____ Date _____

GREASE TRAP 1000 Gallons: PT 620 Date 9-2-99

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 160

No Lines TWO Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

✓ New System ☐ Repair System Type: ☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ✓ No

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

☐ House/Mod. Home No. Bedrooms ____

☐ Mobile Home No. Bathrooms ____

✓ Business No. Employees 2

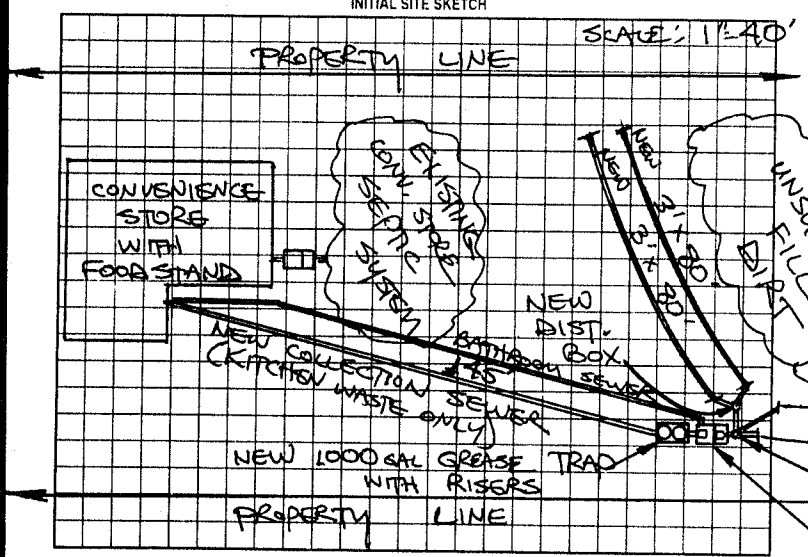
☐ Other 190 FT² FOOD STAND

Water Supply: ☐ Individual ✓ Public ☐ Community

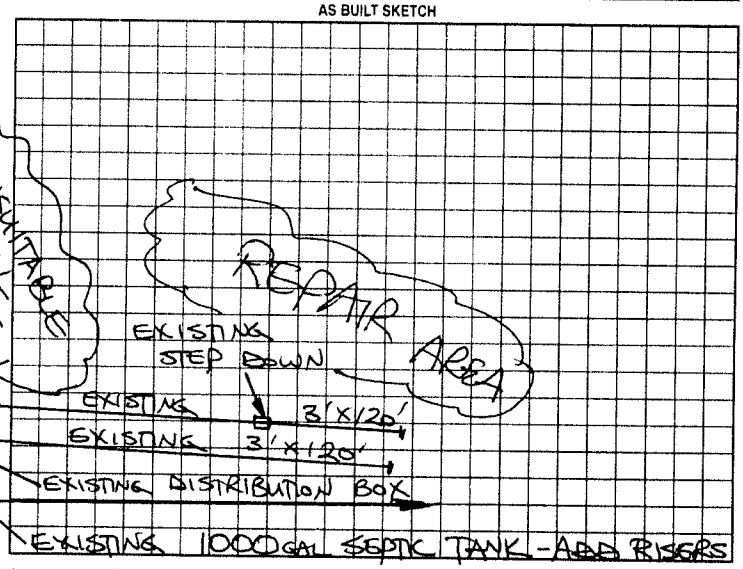
Comments/Conditions: ① INSTALL NEW GREASE TRAP WITH RISERS ② INSTALL RISERS ON EXISTING SEPTIC TANK ③ INSTALL NEW DIST. BOX AT LOCATION SHOWN FEEDING NEW LINES FIRST ④ LANDSCAPE TO PROVIDE ADEQUATE DRAINAGE.

Comments/Conditions: GREASE TRAP & DRAINLINES INSPECTED 10-15-99

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: Nancy Benfield date 10/6/99

Improvement Permit by: STEVE HEDRICK date 10-6-99

Authorization to Construct by: STEVE HEDRICK date 10.6.99

Installed by: SAMMY REAVIS

Operation Permit by: STEVE HEDRICK date 11-16-99

Existing System Inspection by: _____ date _____

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