IREDELL COUNTY HEALTH DEPARTMENT → AUTHORIZATION TO CONSTRUCT

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

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 066959 DATE 6/11/97 TAX MAP NO. 4870788467 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR TODD HAFFORD PHONE: Business Home

ADDRESS 2436 CHARTER OAK ART D GASTONIA NC 28056

LOCATION 21N - TR HIGHLAND - TR REDMON - TR PEPPER - TR NEITLE BROOK

SUBDIVISION SHEFFIELD BLOCK / SECTION LOT 14 LOT AREA .38 AC SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 36 PQ/FT

Septic Tank: 1000 Gallons; STB 1000 Date 4-25-97
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 3 @ 100' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAVITY CHAMBERED
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☑ No

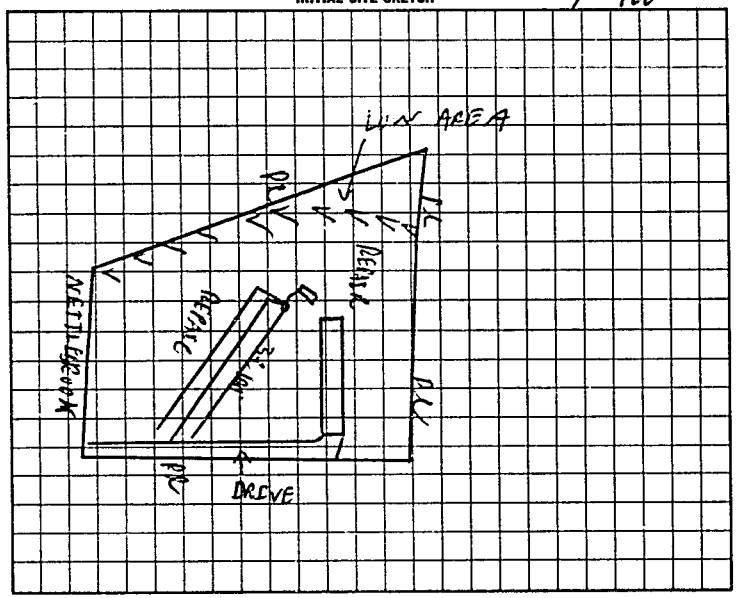
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

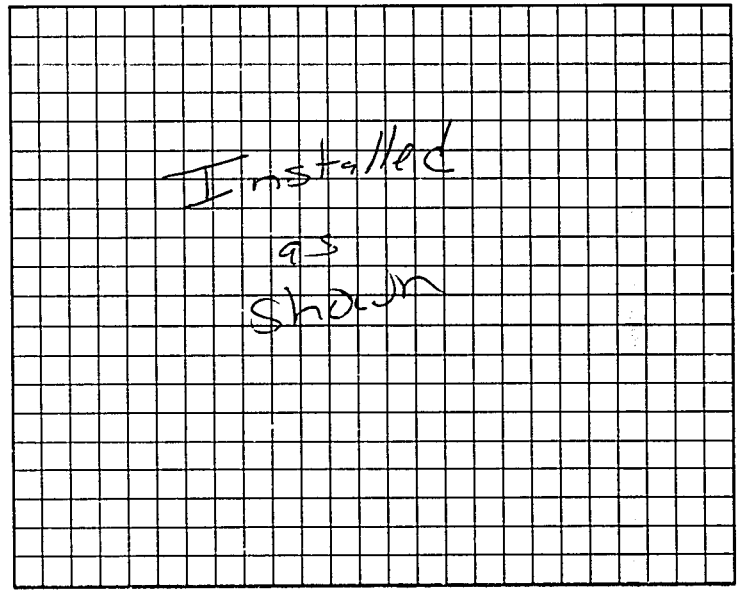
Comments:

Comments:

INITIAL SITE SKETCH 1"=100'



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance.

Signed: Leon Bray

Installed by: James Huddlar

Improvement Permit by: date 6/11/97

Certificate of Completion by: date

AUTHORIZATION TO CONSTRUCT Existing System Inspection by: date 6/11/97

Operation Permit by: RS date 6-25-97

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

9180000