IREDELL COUNTY HEALTH DEPARTMENT

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

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

PROPERTY DESCRIPTION NO. 2457 | DATE 7-29-96 | TAX MAP NO. 12N-A-189 (PART) | Watershed ~~IP Bear Land~~

OWNER OR CONTRACTOR HARMONY PROPERTIES | PHONE: Business | Home 532-6527

ADDRESS 555 MONROE ROAD CHARLOTTE, NC 28212

LOCATION US 21 N, TR TOMLINSON AVE, TR REDMAN RD, TR PEPPERTREE, TR CEDARVALE DRIVE

SUBDIVISION SAGEFIELD | BLOCK / SECTION II | LOT 25 | LOT AREA 0.767 AC | SITE CLASS PS | DESIGN FLOW 360 | L.T.A.R. 0.3 GPD/FT²

Septic Tank: 1000 Gallons; STB 794 Date 6-10-96

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5 Trench Width 36" Max Trench Bottom Depth 18-24" Gravel Depth 12"

☒ New System ☐ Repair System Type: I ☒ II, IV, V, VI

System Description: CONV. GRAVITY

Repair System Description: CHAMBERED PUMP

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

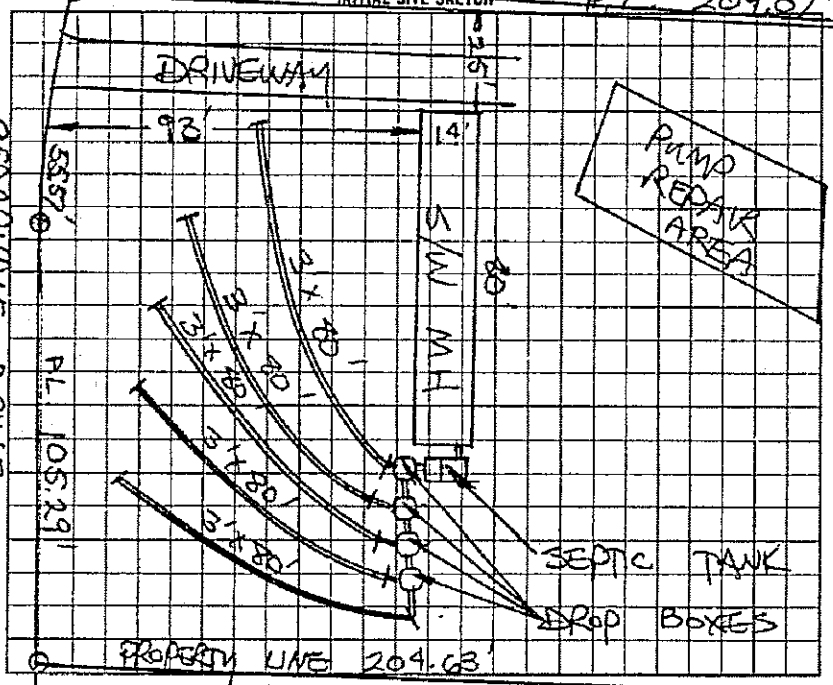
Water Supply: ☐ Individual ☐ Community ☒ Public

Comments: ① INSTALL FIVE LINES ON CONTOUR USING SERIAL DISTRIBUTION. ② KEEP SYSTEM MINIMUM 5' FROM MH, 10' FROM PROPERTY LINE, 10' FROM WATERLINE

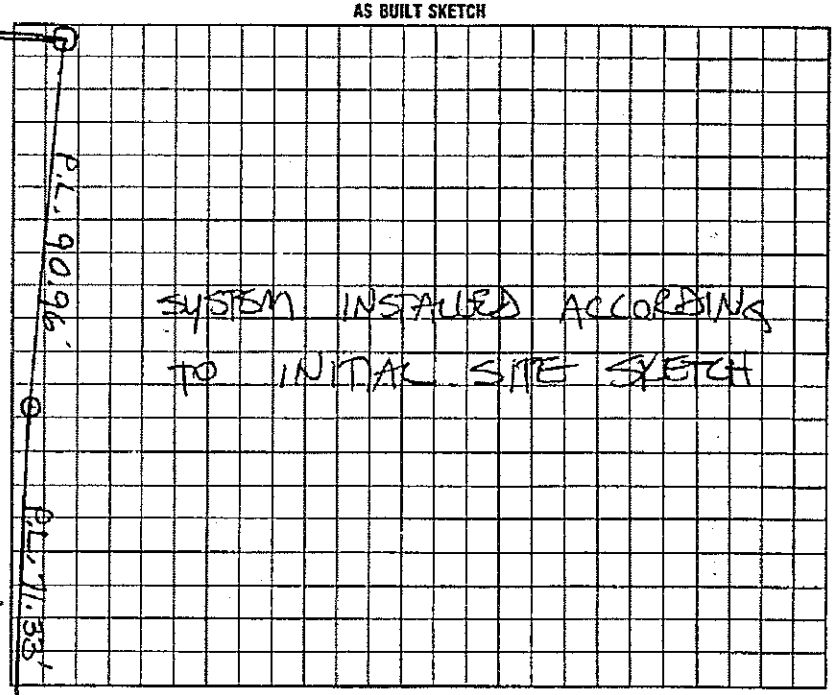
Comments:

3RD LOT ON RIGHT

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit(s) unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.

AUTH. TO CONST. IS VALID FOR FIVE YEARS FROM DATE OF ISSUANCE. IMPROVEMENT PERMIT WITH SITE PLAN IS VALID FOR FIVE YEARS.

Signed: [signature]

Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 7-29-96

AUTH. TO CONST. Existing System Inspection by: STEVE HEDRICK date 7-29-96

~~Certificate of Completion by:~~ _____ date _____

Operation Permit by: STEVE HEDRICK date 8-14-96

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

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