IREDELL COUNTY HEALTH DEPARTMENT

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

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

(E)

PERMIT# 104957 PIN# 4871-11-3625 DATE 3-12-02

OWNER OR CONTRACTOR MICHELLE HEFLER PHONE: Business 704-878-3103 Home 704-664-1634

ADDRESS 108 GREENBAY ROAD, MOORESVILLE NC 28117

LOCATION US 21 N, TL NC 901, TL PRIVATE DRIVE AT BOX # 373, BACK OFF ROAD 500'

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 2.647 ACRES SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB 1012 Date 3-1-02
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270
No Lines THREE 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: CONVENTIONAL, GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 2
☐ Mobile Home No. Bathrooms 2½
☐ Business No. Employees _____
☐ Other _____

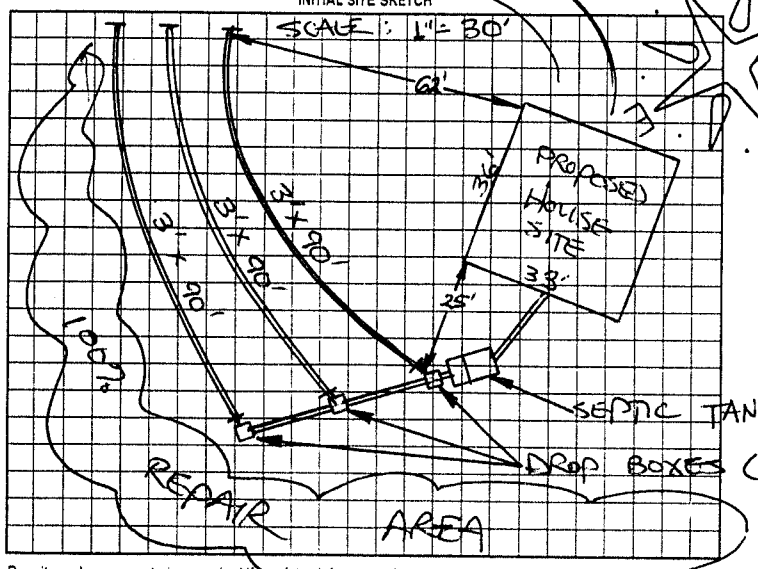
Water Supply: ☐ Individual ☑ Public ☐ Community

Comments/Conditions:

DRIVEWAY

Comments/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "POLYLOK" FILTER

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: X Michelle Hefler Dalton date 3/12/02 Installed by: A-1 BACKHOE

Improvement Permit by: STEVE HEDRICK date 3-12-02 Operation Permit by: STEVE HEDRICK date 6-21-02

Authorization to Construct by: STEVE HEDRICK date 3-12-02 Existing System Inspection by: _____ date _____

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