61404 Paid $50.00 to health department

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. HARMONY DATE 5-24-96 TAX MAP NO. PHONE: Business 838-9769 Home 592-5493 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR BRAD KOERNICK

ADDRESS P.O. Box 5574 STATESVILLE, NC 28677

LOCATION US 21 N, TR HAYES STREET, 3RD LOT ON RIGHT

SUBDIVISION BLOCK / SECTION LOT 3 LOT AREA LIMITED SITE CLASS P3 DESIGN FLOW 240 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 2 Trench Width Max Trench Bottom Depth Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☑ No

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

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 2 No. Bathrooms 1 No. Employees

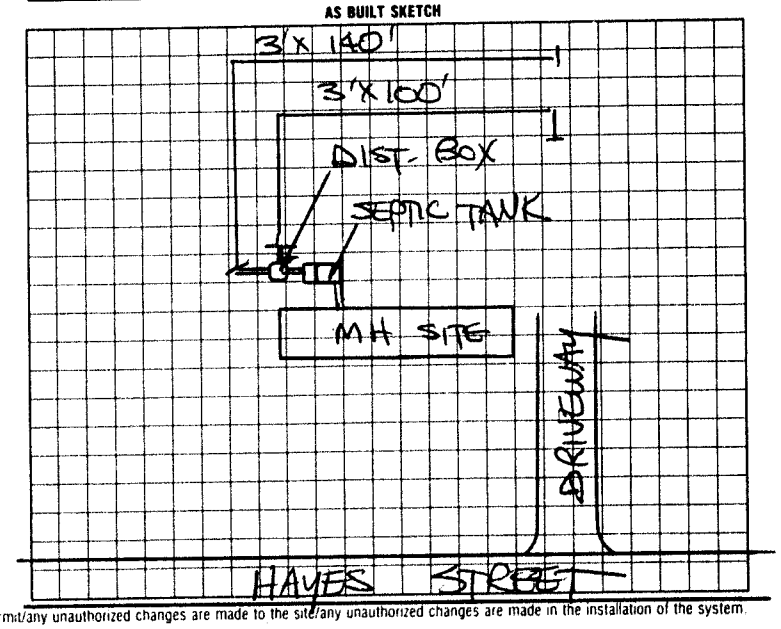
Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

Comments: KEEP MH MINIMUM 5' FROM SYSTEM

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/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.

Signed:

Improvement Permit by: date

Existing System Inspection by: STEVE HEDRICK date 5-24-96

Installed by

Certificate of Completion by date

Operation Permit by date

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