IREDELL COUNTY HEALTH DEPARTMENT

THIS PERMIT VOIDS PREVIOUS ISSUED 5-4-98, O.P. 5-6-98

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

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

PERMIT# 072061 PIN# 4874-42-3873 DATE 11-9-99

OWNER OR CONTRACTOR CHARLES STUTTS PHONE: Business _____ Home _____

ADDRESS 465 BARNARD MILL ROAD, HAMPTONVILLE, NC 27020

LOCATION US 21 NORTH, TL BARNARD MILL ROAD, 1.5 MILES ON LEFT, 350' BACK OFF ROAD

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 31 ACRES SITE CLASS PS DESIGN FLOW 240 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 620 Date 8-4-99
Pump Tank: 1000 Gallons; PT 144 Date 10-12-99
Pump Make: HYDROMATIC Model SHEF 40M Serial No. 5268-00-7
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet EXISTING
No Lines THREE Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

☒ New System ☐ Repair System Type: I. II. (III) IV. V. VI
System Description: CONVENTIONAL PUMP
Repair System Description: CONV. PUMP
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

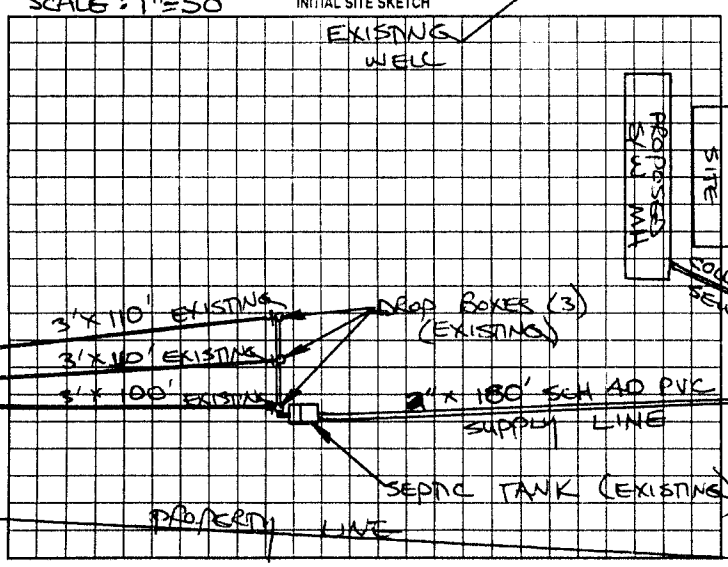
☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 2 No. Bathrooms 2 No. Employees _____

Water Supply: ☒ Individual ☐ Public ☐ Community WELL

Comments/Conditions: SEE ATTACHED SHEETS FOR PUMP

Comments/Conditions: FUTURE 2 BEDROOM HOUSE WITH 1ST FLOOR PLUMBING ONLY @ SW MH TO BE REMOVED UPON OCCUPATION OF HOUSE.

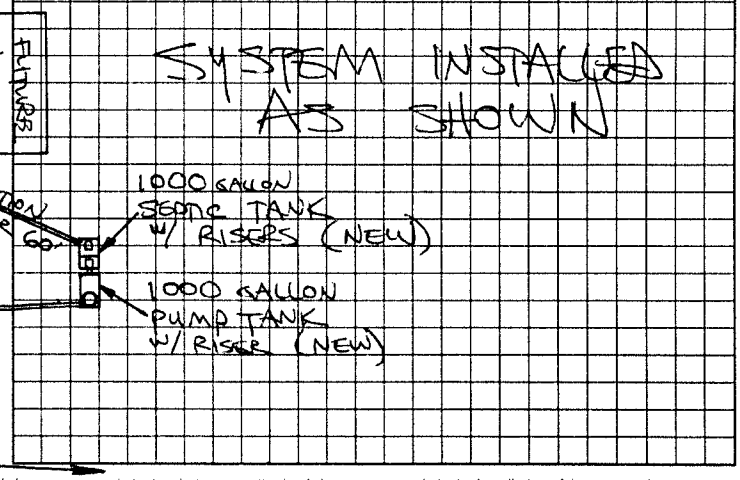
SCALE: 1"=50' INITIAL SITE SKETCH



AS BUILT SKETCH

(3) TANKS AND PUMP INSTALLED 11-24-99 - RSH
(4) ELECTRICAL WORK REMAINS TO BE COMPLETED

SYSTEM INSTALLED AS SHOWN



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: _____ date 11-9-99 Installed by: KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 11-9-99 Operation Permit by: STEVE HEDRICK date 12-6-99

Authorization to Construct by: STEVE HEDRICK date 11-9-99 Existing System Inspection by: _____ date _____

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