IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 107208 PIN# 4880-18-2921 DATE 7-2-02

OWNER OR CONTRACTOR VICKIE DOBSON PHONE Business 704-872-9511, 1340 Home 704-546-5985

ADDRESS 298 REDMON ROAD, HARMONY, NC 28634

LOCATION US 21 N, TR HIGHLAND POINT AV, TR REDMOND ROAD, AT END AT BOX # 298

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 352 ACRES SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons: STB _____ Date _____
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 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: CONV. GRAVITY
Maintenance Agreement Required: ☐ Yes ☒ No
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

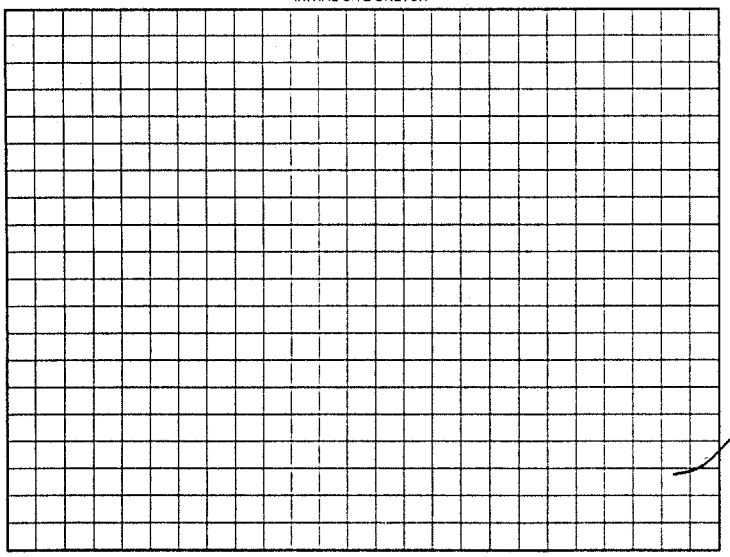
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 3
☐ Business No. Employees _____
☐ Other ADDITION

Water Supply:
☒ Individual
☐ Public
☐ Community
WELL

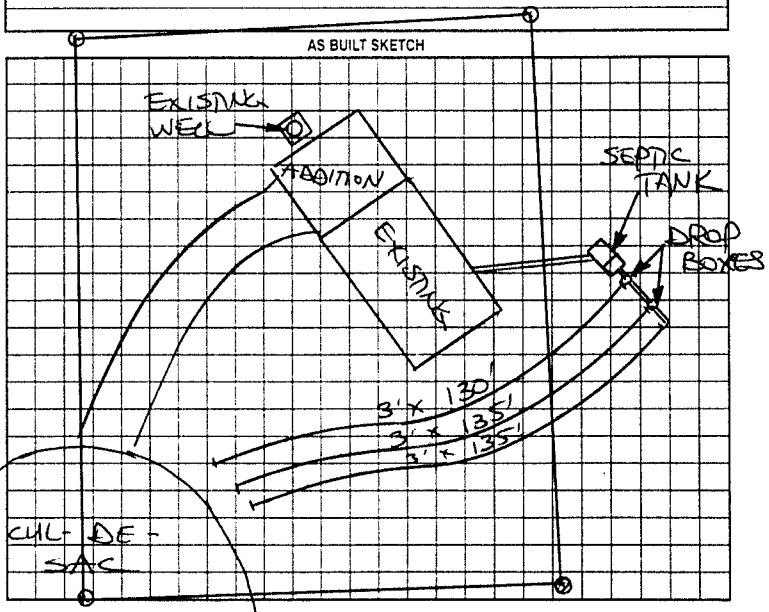
Comments/Conditions:

Comments/Conditions: SYSTEM SIZED FOR 3 BEDROOMS ONLY. SEE EASEMENT RECORDED 9-9-94 (ROBERT REDMON)

INITIAL SITE SKETCH



AS BUILT 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: _____ date _____ Installed by _____

Improvement Permit by: _____ date _____ Operation Permit by: _____ date _____

Authorization to Construct by: _____ date _____ Existing System Inspection by: STEVE HEDRICK date 7-2-02

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